| Fill in this information to identify your case: |   |                                      |
|---|---|--------------------------------------|
| United States Bankruptcy Court for the :        |   |                                      |
| NORTHERNDistrict ofILLINOIS(State)              |   |                                      |
| Case Number (If known):                         | Chapter you are filing under:  Chapter 7 Chapter 11 Chapter 12 Chapter 13 | ☐ Check if this is an amended filing |

## Official Form 101

### **Voluntary Petition for Individuals Filing for Bankruptcy**

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together-called a joint case-and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Part 1:       | Identify Yourself                                |                            |   |
|---------------|--|----------------------------|---|
|               |  | About Debtor 1:            | About Debtor 2 (Spouse Only in a Joint Case): |
| 1. Your       | full name  |                            |   |
|               | the name that is on your                         | Rhonda<br>First name       | First name                                    |
| identif       | ication (for example,<br>Iriver's license or     | Herlett                    |   |
| passp         |  | Middle name  Johnson       | Middle name                                   |
| identif       | your picture ication to your meeting ne trustee. | Last name                  | Last name                                     |
|               |  | Suffix (Sr., Jr., II, III) | Suffix (Sr., Jr., II, III)                    |
| 2. All ot     | her names you                                    |                            |   |
| have<br>years | used in the last 8                               | First name                 | First name                                    |
|               | e your married or<br>n names.                    | Middle name                | Middle name                                   |
|               |  | Last name                  | Last name                                     |
|               |  | First name                 | First name                                    |
|               |  | Middle name                | Middle name                                   |
|               |  | Last name                  | Last name                                     |
| your          | the last 4 digits of<br>Social Security          | XXX - XX - <u>7557</u>     | xxx - xx                                      |
| Indivi        | er or federal<br>dual Taxpayer                   | OR                         | OR  |
| identi        | fication number                                  | <b>9</b> xx - xx           | 9xx - xx                                      |

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Document Rhonda Herlett Debtor 1 Case Number (if known) \_

|    |  | About Debtor 1:   | About Debtor 2 (Spouse Only in a Joint Case):   |
|----|--|---|---|
|    | Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names | Business name  Business name  EIN  EIN  | Business name  Business name  EIN  EIN  |
| 5. | Where you live   | 3501 Doria Lane Number Street   | If Debtor 2 lives at a different address:  Number Street  |
|    |  | Olympia Fields IL 60461 City State ZIP Code COOK County   | City State ZIP Code County  |
|    |  | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.                                     | If Debtor 2's mailing address is different from the one above, fill it in here. Note that the court will send any notices this mailing address.   |
|    |  | 15511 Lincoln Ave   Number   Street   | Number Street  P.O. Box  City State ZIP Code  |
|    | Why you are choosing this district to file for bankruptcy.   | Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  I have another reason. Explain. (See 28 U.S.C. § 1408 | Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  I have another reason. Explain. (See 28 U.S.C. § 1408 |
|    |  |   |   |

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Debtor 1

Rhonda Herlett Document

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Case Number (if known)

| Pa   | rt 2: Tell the Court About Your                 | Bankruptcy   | Case   |                         |   |   |  |
|--|---|--|--|-------------------------|---|---|--|
| 7.   | The chapter of the Bankruptcy Code you          |  | e. (For a brief description<br>Bankruptcy (Form 2010)              |                         |   | S.C. § 342(b) for Individuals<br>k the appropriate box. |  |
|  | are choosing to file under                      | ☐ Chap   | eter 7   |                         |   |   |  |
|  | under   | ☐ Chap   | ter 11   |                         |   |   |  |
|  |   | ☐ Chap   | ter 12   |                         |   |   |  |
|  |   | ■ Chap   | ter 13   |                         |   |   |  |
| 8. How you will pay the fee  I will pay the entire fee when I file my petition. Please check with the clerk's offic local court for more details about how you may pay. Typically, if you are paying the yourself, you may pay with cash, cashier's check, or money order. If your attorney submitting your payment on your behalf, your attorney may pay with a credit card with a pre-printed address. |   |  |  |                         | if you are paying the fee<br>der. If your attorney is |   |  |
|  |   |  | d to pay the fee in insta  | -                       |   | n, sign and attach the<br>s (Official Form 103A).       |  |
|  |   | I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the <i>Application to Have the Chapter 7 Filing Fee Waived</i> (Official Form 103B) and file it with your petition. |  |                         |   |   |  |
| 9.   | Have you filed for bankruptcy within the        | ■ No   |  |                         |   |   |  |
|  | last 8 years?                                   | ☐ Yes.   | District None  | When                    |   | Case Number   |  |
|  |   |  |  |                         | MM / DD / YY  | T T   |  |
|  |   |  | District None  | When                    | MM / DD / YY  | Case Number   |  |
|  |   |  |  |                         | WIWI / DD / TT  | 11  |  |
|  |   |  | District   | When                    | MM / DD / YY  | Case Number   |  |
|  |   |  |  |                         | IVIIVI / DD / 11                                      | 11  |  |
| 10.  | Are any bankruptcy                              | No   |  |                         |   |   |  |
|  | cases pending or being filed by a spouse who is | ☐ Yes.   | Debtor   |                         | I   | Relationship to you                                     |  |
|  | not filing this case with                       |  |  |                         |   | Case Number, if known                                   |  |
|  | you, or by a business parter, or by affiliate?  |  |  |                         | MM / DD / YY  | YY  |  |
|  |   |  |  |                         |   | Relationship to you                                     |  |
|  |   |  | District   | When                    | MM / DD / YY  | Case Number, if knownYY                                 |  |
| 11.  | Do you rent your residence?                     | ■ No.<br>□ Yes.  | Go to line 12<br>Has your landlord obta                            | nined an eviction judgm | ent against you?                                      |   |  |
|  |   |  | ☐ No. Go to line 12☐ Yes. Fill out <i>Initia</i> this bankruptcy p | al Statement About an E | Eviction Judgmen                                      | t Against You (Form 101A) and file it with              |  |

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Document Rhonda Herlett Debtor 1 Case Number (if known)

| Name of business, if any  Name of business, | <ol> <li>Are you a sole proprietor<br/>of any full- or part-time<br/>business?</li> <li>A sole proprietorship is a</li> </ol> | ■ No.<br>□ Yes. | Go to Part 4.  Name and location of  | business                   |                      |               |      |
|---|---|-----------------|--|----------------------------|----------------------|---------------|------|
| Number   Street   Number   Number   Street   Number   N  | business you operate as an individual, and is not a separate legal entity such as   |                 | Name of business, if any   |                            |                      |               |      |
| Check the appropriate box to describe your business:    Health Care Business (as defined in 11 U.S.C. § 101(27A))   Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))   Stockbroker (as defined in 11 U.S.C. § 101(53A))   Commodity Broker (as defined in 11 U.S.C. § 101(69))   None of the above    None of the above   None of the above  | LLC. If you have more than one sole proprietorship, use a separate sheed and attach it  |                 | Number Street  |                            |                      |               |      |
| Health Care Business (as defined in 11 U.S.C. § 101(27A))   Single Asset Real Estate (as defined in 11 U.S.C. § 101(61B))   Stockbroker (as defined in 11 U.S.C. § 101(63A))   Commodity Broker (as defined in 11 U.S.C. § 101(6))   Nane of the above    If you are filling under Chapter 11, the court must know whether you are a small business debtor, you must attach your most rebalances beset, statement of operations, cash-flow statement, and federal income tax return or if any of the documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).   No.   I am not filling under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.   Yes.   I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.   Yes.   I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.   Yes.   I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.   Yes.   What is the hazard?   If immediate attention   Yes. What is the hazard?   If immediate attention   Yes. What is the hazard?   If immediate attention   Yes. What is the property   Number   Street   Number  |   |                 | City   |                            |                      | State Zip Cod | le   |
| Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))   Stockbroker (as defined in 11 U.S.C. § 101(63A))   Commodity Broker (as defined in 11 U.S.C. § 101(69))   None of the above   If you are filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor. Yes addition of small business debtor. See 11 U.S.C. § 101(51D).   No.   I am filing under Chapter 11.   In the court must know whether you are a small business debtor, you must attach your most rebalance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of the documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).   No.   I am filing under Chapter 11.   In the sharkruptcy Code.   Yes.   I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.   Yes.   I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.   Yes.   I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.   Yes.   Y  |   |                 | Check the appropriate  | box to describe your bu    | siness:              |               |      |
| Stockbroker (as defined in 11 U.S.C. § 101(53A))   Commodity Broker (as defined in 11 U.S.C. § 101(6))   None of the above  |   |                 | ☐ Health Care Bus  | iness (as defined in 11 U  | .S.C. § 101(27A))    |               |      |
| Commodity Broker (as defined in 11 U.S.C. § 101(6))   None of the above    None of the above   None of the above  |   |                 | ☐ Single Asset Re  | al Estate (as defined in 1 | 1 U.S.C. § 101(51B)) |               |      |
| Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor you must attach your most re balance shedy a small business debtor?  For a definition of small business debtor, see 11 U.S.C. § 101(51D).  No. I am not filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.  The Bankruptcy Code.  Seport If You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention  No.  What is the hazard?  If you are filing under Chapter 11, the court must know whether you are a small business debtor you must attach your most re balance sheet, statement, and feeral income tax return or if any of the documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).  No. I am not filing under Chapter 11.  No. I am filing under Chapter 11.  No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.  The Bankruptcy Code.  Yes. What is the hazard?  What is the hazard?  If you are filing under Chapter 11, the court must know whether you are a small business debtor so that a spray of the definition of the definition of the definition in the Bankruptcy Code.  No. I am not filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.  Yes. What is the hazard?  If you are filing under Chapter 11, the court must know whether you are a small business debtor according to that a small business debtor according to the definition in the Bankruptcy Code.  No. I am not filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.  Yes. What is the hazard?  Where is the property?  Number Street   |   |                 | ☐ Stockbroker (as  | defined in 11 U.S.C. § 10  | 01(53A))             |               |      |
| Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor, so mall business debtor, see 11 U.S.C. § 101(51D).  If you are filing under Chapter 11, the court must know whether you are a small business debtor, you must attach your most re balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of the documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).  No. 1 am not filing under Chapter 11.  No. 1 am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.  Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.  Part 4:  Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention  No.  Yes. What is the hazard?  If immediate attention is needed, why is it needed?    Where is the property?  |   |                 | ☐ Commodity Brok   | er (as defined in 11 U.S.  | C. § 101(6))         |               |      |
| Chapter 11 of the Bankruptcy Code and are you a small business debtor?  For a definition of small business debtor, see 11 U.S.C. § 101(51D).  No. I am not filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.  Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.  Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.  No. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.  Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.  No. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.  Yes. What is the hazard?  If immediate attention is needed, why is it needed?  Where is the property?  Number Street  |   |                 | ☐ None of the abo  | ve                         |                      |               |      |
| In Do you own or have any property that poses or is alleged to pose a threat of imminent and indentifiable hazard to public health or safety?  Or do you own any property that needs immediate attention?  For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?  Where is the property?  Number Street   | business debtor, see  | ☐ No.           | am filing under Chapte<br>the Bankruptcy Code.<br>I am filing under Chapte | r 11, but I am NOT a sma   |                      | -             |      |
| property that poses or is alleged to pose a threat of imminent and indentifiable hazard to public health or safety?  Or do you own any property that needs immediate attention?  For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?  Where is the property?  Number Street   | Part 4: Report if You Own or Ha   | ve Any Hazard   | lous Property or Any Pro   | perty That Needs Immedia   | ate Attention        |               |      |
| property that poses or is alleged to pose a threat of imminent and indentifiable hazard to public health or safety?  Or do you own any property that needs immediate attention?  For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?  Where is the property?  Number Street   |   | <b>.</b>        |  |                            |                      |               |      |
| public health or safety?  Or do you own any property that needs immediate attention?  For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?  Where is the property?  Number Street  | property that poses or is alleged to pose a threat  | _               | What is the hazard?  |                            |                      |               |      |
| If immediate attention?  For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?  Where is the property?  Number Street   | public health or safety?<br>Or do you own any   |                 |  |                            |                      |               |      |
| Where is the property?  Number Street   | immediate attention? For example, do you own perishable goods, or livestock that must be fed, or a building                   |                 | If immediate attention is  | s needed, why is it neede  | d?                   |               |      |
| Number Street   | tnat needs urgent repairs?  |                 |  |                            |                      |               |      |
| Other 700 C   |   |                 | Where is the property?   |                            |                      |               |      |
| Ott. 7ID C  |   |                 |  |                            |                      |               |      |
| CITY State ZIP C  |   |                 |  | City                       | <del></del> ,        | State ZIP     | Code |

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Debtor 1

Rhonda

Herlett

Abo

Document

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Case Number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

> The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

| Abo |
|-----|
|     |
|     |

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any,

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing al | oout |
|--|------|
| credit counseling because of:              |      |

Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me

to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

#### out Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any,

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must you file. still receive a briefing within 30 days after approved You must file a certificate from the agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to rece | ive a briefing about |
|---------------------------|----------------------|
| credit counseling because | se of:               |

Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me

to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. Case 18-25457 Doc 1 Filed 09/10/18 Entered 09/10/18 17:22:19 Desc Main

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Case Number (if known)

| Pa  | rt 6: Answer These Questions   | for Reporting Purposes   |  |  |
|-----|--|--|--|--|
| 16. | What kind of debts do you have?  | as "incurred by an individual  No. Go to line 16b.  Yes. Go to line 17.  16b. Are your debts primarily money for a business or invention of the line 16c.  Yes. Go to line 17.   | consumer debts? Consumer debts are definition primarily for a personal, family, or household primarily for a personal family fa | burpose."  s that you incurred to obtain ss or investment.   |
| 17. | Are you filing under Chapter 7?  Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors? |  | napter 7. Go to line 18.  er 7. Do you estimate that after any exempt p. s are paid that funds will be available to distrib  |  |
| 18. | How many creditors do you estimate that you owe?   | ■ 1-49<br>□ 50-99<br>□ 100-199<br>□ 200-999  | ☐ 1,000-5,000<br>☐ 5,001-10,000<br>☐ 10,001-25,000   | ☐ 25,001-50,000<br>☐ 50,001-100,000<br>☐ More than 100,000   |
| 19. | How much do you estimate your assets to be worth?  | □ \$0-\$50,000<br>□ \$50,001-\$100,000<br>■ \$100,001-\$500,000<br>□ \$500,001-\$1 million   | \$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million  | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion  More than \$50 billion   |
| 20. | How much do you estimate your liabilities to be?   | □ \$0-\$50,000 □ \$50,001-\$100,000 ■ \$100,001-\$500,000 □ \$500,001-\$1 million  | \$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million  | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion  |
| Pa  | Sign Below   |  |  |  |
| For | you  | correct.  If I have chosen to file under Chap of title 11, United States Code. I ur under Chapter 7.  If no attorney represents me and I this document, I have obtained and I request relief in accordance with I understand making a false statem |  | e, under Chapter 7, 11,12, or 13 ter, and I choose to proceed  ot an attorney to help me fill out b).  ecified in this petition.  or property by fraud in connection |
|     |  | Signature of Debtor 1  Executed on09/05/2018   | Signat Execu   | ture of Debtor 2  ted onMM / DD / YYYY   |

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Debtor 1 Rhonda Herlett Johnson Case Number (if known)

For your attorney, if you are represented by one

if you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| 🗶 /s/ Cecil Denard Scruggs       | Date    | Date: 09/10/2     | 2018                          |
|----------------------------------|---------|-------------------|-------------------------------|
| Signature of Attorney for Debtor |         | MM / DD / YYY     | Y                             |
| Cecil Denard Scruggs             |         |                   |                               |
| Printed name                     |         |                   | _                             |
| Geraci Law L.L.C.                |         |                   |                               |
| Firm name                        |         |                   | _                             |
| 55 E. Monroe St., #3400          |         |                   |                               |
|                                  |         |                   | _                             |
| Number Street                    |         |                   |                               |
|                                  |         | 00000             | _                             |
| Chicago                          | IL      | 60603             | -                             |
|                                  | ILState | 60603<br>ZIP Code | -                             |
| Chicago                          | State   |                   | -<br>-<br>acilaw.com          |
| Chicago                          | State   | ZIP Code          | -<br>-<br>acilaw.c <u>o</u> n |

| Debtor 1           | Rhonda                 | Herlett                          | Johnson          |  |  |
|--------------------|------------------------|----------------------------------|------------------|--|--|
|                    | First Name             | Middle Name                      | Last Name        |  |  |
| Debtor 2           |                        |                                  |                  |  |  |
| Spouse, if filing) | First Name             | Middle Name                      | Last Name        |  |  |
| Inited States      | Bankruptcy Court for t | he : <u>NORTHERN</u> District of | ILLINOIS (State) |  |  |
| Case Number(Gale)  |                        |                                  |                  |  |  |

# Check if this is an amended filing

## Official Form 106Sum

#### **Summary of Your Assets and Liabilities and Certain Statistical Information**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

| Part 1:  | Summarize Your Assets   |   |
|----------|---|---|
|          |   | <b>Your assets</b><br>Value of what you own |
|          | le A/B: Property (Official Form 106A/B) y line 55, Total real estate, from Schedule A/B   | \$ 110,000                                  |
| 1b. Copy | y line 62, Total personal property, from Schedule A/B   | \$ 26,295                                   |
| 1c. Copy | y line 63, Total of all property on Schedule A/B  | <u>\$ 136,295</u>                           |
| Part 2:  | Summarize Your Liabilities  |   |
|          |   | Your liabilities<br>Amount you owe          |
|          | be D: Creditors Who Have Claims Secured by Property (Official Form 106D) by the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$100,970                                   |
|          | e E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) y the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F                             | \$0   |
| 3b. Сору | y the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F  | \$78,119                                    |
|          |   |   |
| Part 3:  | Summarize Your Liabilities  |   |
|          | e I: Your Income (Official Form 106I) our combined monthly income from line 12 of Schedule I  | \$4,728.70                                  |
|          | e J: Your Expenses (Official Form 106J) our monthly expenses from line 22c of Schedule J  | \$3,278.00                                  |

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Document Rhonda Herlett Case Number (if known) \_\_ Debtor 1 First Name Middle Name Last Name

| Part 4: Answer These Questions for Administrative and Statistical Records   |             |  |  |  |  |  |
|---|-------------|--|--|--|--|--|
| Are you filing for bankruptcy under Chapter 7, 11 or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.  Yes   |             |  |  |  |  |  |
| Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.  Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. |             |  |  |  |  |  |
| 8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14. \$8,113.50  |             |  |  |  |  |  |
| 9. Copy the following special categories of claims from Part 4, line 6 of <i>Schedule E/F</i> :   | Total claim |  |  |  |  |  |
| From Part 4 of Schedule E/F, copy the following:  |             |  |  |  |  |  |
| 9a. Domestic support obligations (Copy line 6a.)  | \$_0.00     |  |  |  |  |  |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.)   | \$_0.00     |  |  |  |  |  |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)   | \$_0.00     |  |  |  |  |  |
| 9d. Student loans. (Copy line 6f.)  | \$_0.00     |  |  |  |  |  |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)  | \$_0.00     |  |  |  |  |  |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)  | \$_0.00     |  |  |  |  |  |
| 9g. <b>Total.</b> Add lines 9a through 9f.  | \$_0.00     |  |  |  |  |  |

| Fill in this in                                   | Caso 19 25<br>Information to identify yo  |  |  | Entered 09/10/18 2  | 17:22:19 Desc   | Main                  |  |
|---|---|--|--|---|---|-----------------------|--|
| riii iii tiiis ii                                 | normation to identity yo  | our case and this min  | y.   | 0 of 59   |   |                       |  |
| Debtor 1  | Rhonda  | Herlett  | Johnson  |   |   |                       |  |
|   | First Name  | Middle Name  | Last Name  |   |   |                       |  |
| Debtor 2 (Spouse, if filing)                      | First Name  | Middle Name  | Last Name  |   |   |                       |  |
| (Spouse, II IIIIIg)                               | riist Name  | widdie Name  | Last Name  |   |   |                       |  |
| United States                                     | Bankruptcy Court for the : _  | NORTHERN District  | of <u>ILLINOIS</u><br>(State)  |   |   |                       |  |
| Case Number                                       | r   |  |  |   | _   | Check if this is an   |  |
| (If known)  |   |  |  |   |   | amended filing        |  |
| Official F  | orm 106A/B  |  |  |   |   |                       |  |
| Schedul   | e A/B: Prope  | rty  |  |   |   | 12/15                 |  |
| ategory where<br>esponsible for<br>ages, write yo | e you think it fits best. B<br>supplying correct infor<br>our name and case num | e as complete and ac<br>rmation. If more spac<br>ber (if known). Answe | curate as possible. If two ma<br>e is needed, attach a separat   | fits in more than one category,<br>arried people are filing together<br>e sheet to this form. On the top<br>we an Interest In | r, both are equally                                   |                       |  |
| _   | vn or have any legal or   | equitable interest in a  | ny residence, building, land,  | or similar property?  |   |                       |  |
| No.   | Danasilka   |  |  |   |   |                       |  |
| Yes.  | Describe  |  | What is the property? Check  | k all that apply.   | Do not deduct secured clair                           | ms or exemptions. Put |  |
| 3501 Dor  | ia Lane   |  | Single-family home   |   | the amount of any secured                             | claims on Schedule D: |  |
| Street addr                                       | ress, if available, or other de   | scription  | Duplex or multi-unit buildin   | g   | Creditors Who Have Claim                              | s Secured by Property |  |
|   |   |  | Condominium or cooperation   | ve  | Current value of the                                  | Current value of the  |  |
|   |   |  | Manufactured or mobile ho  | me  | entire property?                                      | portion you own?      |  |
| Olympia I   | Fields  | IL 60461   | Land   |   | \$110,000.00  | \$110,000.00          |  |
| City  |   | State ZIP Code   | Investment property  |   |   |                       |  |
|   |   |  | Timeshare  |   | Describe the nature of your ownership                 |                       |  |
| County  |   |  | Other  |   | interest (such as fee simple, tenancy by              |                       |  |
|   |   |  | Who has an interest in the   | property? Check one.  | the entireties, or a life es                          | stat), if known.      |  |
|   |   |  | Debtor 1 only  |   |   |                       |  |
|   |   |  | Debtor 2 only  |   | Па и.и  |                       |  |
|   |   |  | Debtor 1 and Debtor 2 only   | 1   | Check if this is a co (see instructions)              | mmunity property      |  |
|   |   |  | At least one of the debtors  | and another   | (**************************************               |                       |  |
|   |   |  | Other information you wish<br>property identification num  | to add about this item, such a ber:31-14-414-018-000  |   |                       |  |
|   |   |  |  |   |   |                       |  |
|   | •   |  | ur entries fro Part 1, includin  |   |   |                       |  |
| you have a  | ttached for Part 1. Write   | e that number here   |  |   | >   | \$110,000.00          |  |
| Part 2:   | Describe Your Vehicles  |  |  |   |   |                       |  |
| -   |   | -  | =  | registered or not? Include any ecutory Contracts and Unexpire   |   |                       |  |
| 03. Cars, vans                                    | s, trucks, tractors, spor   | t utility vehicles, moto   | orcycles   |   |   |                       |  |
| Yes.  | Describe  | Bmw  | Marie a la companya de la companya d |   |   |                       |  |
|   | Make:   |  | Who has an interest in the p   | property? Check one.  | Do not deduct secured clair the amount of any secured |                       |  |
| N   | Model:  | 325  | Debtor 1 only  Debtor 2 only   |   | Creditors Who Have Claims                             |                       |  |
| ١   | Year:   | 2011   | Debtor 2 only  Debtor 1 and Debtor 2 only  | ı   | Current value of the                                  | Current value of the  |  |
| A   | Approximate Mileage:  | 126,000  | At least one of the debtors  |   | entire property?                                      | portion you own?      |  |
| (   | Other information:  |  |  | and direction   | \$10,845.00   | \$10,845.00           |  |
|   | 2011 Bmw 325 with over  | 126,000 miles.   | Check if this is commu instructions)   | nity property (see  |   |                       |  |
|   |   |  | ]  |   |   |                       |  |

Debtor 1 R

| Rhonda     | Case 18-25457 | Doc 1 | Filed 09/10/18  Document | Entered 09/10/18 17:22:19<br>Page 11 of 59 umber (if known) | Desc Main |
|------------|---------------|-------|--------------------------|---|-----------|
| First Name | Middle Name   |       | Last Name                | Page 11 01 59   |           |

| 04.  |                                    |   | homes, ATVs and other recreational vehicles, other vehicles, and accessories ors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories |                    |  |              |
|------|------------------------------------|---|---|--------------------|--|--------------|
| 5. 4 | Add the doll                       | ar value of the p                       | portion you own for all of your entries fro Part 2, including any entries for pages   |                    |  | \$ 10,845.00 |
|      | you have at                        | tached for Part                         | 2. Write that number here>  |                    |  | ψ 10,043.00  |
|      | Part 3:                            | escribe Your Pe                         | rsonal and Household Items  |                    |  |              |
| Do   | you own or                         | have any legal                          | or equitable interest in any of the following items?  | <b>por</b><br>Do r | rent value o<br>tion you own<br>not deduct sec<br>exemptions | n?           |
| 06.  |                                    | l goods and furr<br>Major appliances, t | nishings<br>furniture, linens, china, kitchenware   |                    |  |              |
|      | Yes.                               | Describe                                | Furniture, linens, small appliances and bedroom set \$2,  | 000                | \$   | 2,000.00     |
| 07.  |                                    | Televisions and rac                     | dios; audio, video, stereo, and digital equipment; computers, printers, scanners; music including cell phones, cameras, media players, games                |                    |  |              |
|      | Yes.                               | Describe                                | Flat screen TV, computer and cell phone \$5   | 500                | \$   | 500.00       |
| 08.  |                                    | Antiques and figuri                     | nes; paintings, prints, or other artwork; books, pictures, or other art objects; collections; other collections, memorabilia, collectibles                  |                    |  |              |
|      | Yes.                               | Describe                                |   |                    | \$   | 0.00         |
| 09.  | Examples:                          |   | hobbies  lic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes  nusical instruments                                     |                    |  |              |
|      | Yes.                               | Describe                                |   |                    | \$   | 0.00         |
| 10.  | Firearms Examples:                 | Pistols, rifles, shoto                  | guns, ammunition, and related equipment   |                    |  |              |
|      | Yes.                               | Describe                                |   |                    | \$   | 0.00         |
| 11.  | Examples:                          |   | furs, leather coats, designer wear, shoes, accessories  |                    |  |              |
|      | Yes.                               | Describe                                | Everyday clothes and shoes \$5  | 500                | \$   | 500.00       |
| 12.  | Jewelry Examples: gold, silver No. | Everyday jewelry, o                     | costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems,  |                    |  |              |
|      | Yes.                               | Describe                                | Everyday jewelry \$2  | 250                | \$   | 250.00       |
| 13.  | Non-farm a Examples: No.           | <b>animals</b><br>Dogs, cats, birds, h  | norses  |                    | -  |              |
|      | Yes.                               | Describe                                |   |                    | s  | 0.00         |

Debtor 1

Rhonda

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| 14. | Any other No.           | personal and h                          | ousehold items you did not   | already list, including any health aids you did not list  |       |   |            |
|-----|-------------------------|---|--|---|-------|---|------------|
|     | Yes.                    | Describe                                | Books and Family Photos  |   | \$100 | \$  | 100.00     |
| 15. |                         |   | =  | including any entries for pages you have attached   |       |   | \$3,350.00 |
|     |                         |   |  | >   |       |   |            |
|     | Part 4:                 | Describe Your Fi                        | nancial Assets   |   |       |   |            |
| Do  | you own or              | <sup>,</sup> have any legal             | l or equitable interest in any   | of the following?   |       | portion you ov<br>Do not deduct se<br>or exemptions | vn?        |
| 16. | Cash Examples: No. Yes. | Money you have in                       | n your wallet, in your home, in a s  | safe deposit box, and on hand when you file your petition   |       |   |            |
|     |                         | •                                       |  |   |       | \$  | 0.00       |
| 17. |                         | Checking, savings                       | s, or other financial accounts; certi<br>If you have multiple accounts with          | ificates of deposit; shares in credit unions, brokerage houses, h the same institution, list each.                      |       |   |            |
|     | Yes.                    | Describe                                | Account Type: Checking Account   | Institution name:<br>TCF Bank   |       | ¢   | 800.00     |
|     |                         |   | Checking Account   | First Citizens Bank   |       | ⊸<br>\$   | 2,300.00   |
|     |                         |   | Savings Account  | TCF Bank  |       | \$  | 3,000.00   |
|     |                         |   | Savings Account  | TCF Bank  |       | \$  | 6,000.00   |
|     |                         |   | . DP-L-4L-4L-1   |   |       | \$  | 12,100.00  |
|     |                         |   | publicly traded stocks tment accounts with brokerage fir Institution or issuer name: | ms, money market accounts   |       |   |            |
| 19. | Non-public              | ly traded stock                         | and interests in incorporate   | ed and unincorporated businesses, including an interest in  |       | \$  | 0.00       |
|     | Yes.                    | Describe                                | Name of Entity and Percent   | of Ownership:   |       | \$  | 0.00       |
| 20. | Negotiable              | instruments includ                      | de personal checks, cashiers' che  | ole and non-negotiable instruments acks, promissory notes, and money orders. acks omeone by signing or delivering them. |       |   |            |
|     | Yes.                    | Describe                                | Issuer name:   |   |       | \$  | 0.00       |
| 21. |                         | t or pension acc<br>Interests in IRA, E |  | ift savings accounts, or other pension or profit-sharing plans  |       |   |            |
|     | Yes.                    | Describe                                | Type of account and Institut Pension plan  | ion name: State of Illinois   |       | ¢   | Unknown    |
|     |                         |   | i chaon plan   | otate of minors   |       | ⊸<br>\$   | 0.00       |
| 22. | Your share              |   | osits you have made so that you r  | may continue service or use from a company<br>ties (electric, gas, water), telecommunications                           |       |   |            |
|     | Yes.                    | Describe                                | Institution name or individua  | al:   |       | •   | 0.00       |
| 23. | Annuities (             | (A contract for a                       | a periodic payment of mone   | y to you, either for life or for a number of years)   |       | <b>\$</b>   | 0.00       |
|     | Yes.                    | Describe                                | Issuer name and description  | n:  |       | \$  | 0.00       |
| 24. |                         |   | IRA, in an account in a quali<br>(b), and 529(b)(1).                                 | ified ABLE program, or under a qualified state tuition program.   |       | _   |            |
|     | Yes.                    | Describe                                | Institution name and descrip   | otion. Separately file the records of any interests.11 U.S.C. § 521(c):   |       | •   | 0.00       |

Debtor 1

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25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers Nο Describe..... Yes. 0.00 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements No. Yes. Describe..... 0.00 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses No. Describe..... 0.00 Money or property owed to you? Current value of the portion you own? Do not deduct secured claims or exemptions 28. Tax refunds owed to you No. Describe..... 0.00 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement No. Describe..... Yes. 0.00 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else No. Yes. Describe..... 0.00 31. Interest in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance No. Company Name & Beneficiary: Yes. Describe Health insurance \$0 Term life insurance - no cash surrender value. 0.00 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. No. Yes. Describe..... 0.00 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue Nο Yes. Describe..... 0.00 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights No. Yes. Describe..... 0.00 35. Any financial assets you did not already list No. Describe..... 0.00 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached \$12,100.00 for Part 4. Write that number here ----

Schedule A/B: Property

Official Form 106A/B

Debtor 1 Rhonda Case 18-25457 Doc 1 Filed 09/10/18 Entered 09/10/18 17:22:19 Desc Main Page 14 of 59 Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.

37. Do you own or have any legal or equitable interest in any business-related property?

No.

Yes.

| Tall of  |  |
|--|--|
| 37. Do you own or have any legal or equitable interest in any business-related property?  No.  |  |
| Yes.   |  |
|  | Current value of the portion you own? Do not deduct secured claims or exemptions |
| 38. Accounts receivable or commissions you already earned No.  |  |
| Yes. Describe  | \$ <u>0.0</u> 0  |
| 39. Office equipment, furnishings, and supplies  Examples: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices  No. |  |
| Yes. Describe  | \$0.00   |
| 40. Machinery, fixtures, equipment, supplies you use in business, and tools of your trade  No.   |  |
| Yes. Describe  | \$0.00   |
| 41. Inventory No.  |  |
| Yes. Describe  | \$0.00   |
| 42. Interests in partnerships or joint ventures  |  |
| No. Name of Entity and Percent of Ownership:  Yes. Describe  |  |
|  | \$0.00   |
| 43. Customer lists, mailing lists, or other compilations  No.  |  |
| Yes. Describe  | \$0.00   |
| 44. Any business-related property you did not already list  No.  |  |
| Yes. Describe  | \$ <u>0.0</u> 0  |
| 45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached   |  |
| for Part 5. Write that number here>  | \$ 0.00  |
| Part 6:  Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In.  If you own or have an interest in farmland, list it in Part 1.                                |  |
| 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?  |  |
| No.  Yes. Describe   | s 0.00   |
| 47. Farm animals   | \$0.00   |
| Examples: Livestock, poultry, farm-raised fish  No.  |  |
| Yes. Describe  | \$0.00   |
| 48. Crops—either growing or harvested No.  |  |
| Yes. Describe  | \$0.00   |
| 49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade  No.   |  |
| Yes. Describe  | \$ 0.00  |

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|                | riistivallie         | IVI                  | dule Name                      | Last Name                      |   |   |               |
|----------------|----------------------|----------------------|--------------------------------|--------------------------------|---|---|---------------|
| 50. I          | Farm and fishing s   | supplies, chemic     | als, and feed                  |                                |   |   |               |
|                | Yes. Descri          | ibe                  |                                |                                |   |   |               |
| 51. /          | Anv farm- and con    | nmercial fishing     | related property you o         | did not already list           |   |   | \$0.00        |
|                | No.                  |                      |                                |                                |   |   |               |
|                | Yes. Descri          | ibe                  |                                |                                |   |   | \$0.00        |
| 52. <b>A</b>   | Add the dollar valu  | ie of all of your e  | entries from Part 6. inc       | cluding any entries for page   | es vou have attached                    |   |               |
|                |                      | =                    |                                |                                |   | > | \$0.00        |
|                |                      |                      |                                |                                |   |   |               |
| Pa             | Describe             | All Property You     | Own or Have an Interes         | st in That You Did Not List Al | pove                                    |   |               |
| 53. I          | Do you have other    | property of any      | kind you did not alrea         | ady list?                      |   |   |               |
|                | Examples: Season ti  | ickets, country club | membership                     |                                |   |   |               |
|                | Yes. Descri          | ibe                  |                                |                                |   |   |               |
|                |                      |                      |                                |                                |   |   | \$0.00        |
| 54. <b>A</b>   | Add the dollar valu  | e of all of your e   | ntries from Part 7. W          | rite that number here          |   | > | \$0.00        |
| Pa             | rt 8: List the 1     | otals of Each Pa     | rt of this Form                |                                |   |   |               |
| 55. <b>P</b>   | art 1: Total real e  | state, line 2        |                                |                                |   |   | \$ 110,000.00 |
| 56. <b>P</b>   | art 2: Total vehicl  | les, line 5          |                                |                                | \$ 10,845.00                            |   |               |
| 57. <b>P</b>   | art 3: Total perso   | nal and househo      | old items, line 15             |                                | \$ 3,350.00                             |   |               |
| 58. <b>P</b>   | art 4: Total financ  | cial assets, line 3  | 6                              |                                | \$ 12,100.00                            |   |               |
| 59. <b>P</b>   | art 5: Total busin   | ess-related prop     | erty, line 45                  |                                | \$ 0.00                                 |   |               |
| 60. <b>P</b>   | art 6: Total farm-   | and fishing-rela     | ted property, line 52          |                                | \$ 0.00                                 |   |               |
| 61. <b>P</b>   | art 7: Total other   | property not list    | ed, line 54                    |                                | \$ 0.00                                 |   |               |
| 62. <b>T</b>   | otal personal prop   | perty. Add lines 5   | 6 through 61                   |                                | \$ 26,295.00                            |   | \$ 26,295.00  |
|                | , ,                  | -                    | Ü                              |                                | , ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |   | , 1, 2000     |
| 62 <b>T</b>    | otal of all property | , on Schodula A      | /R Add line 55 + line 6        | 32                             |   |   | ¢426.205.00   |
| υ <b>ວ</b> . Ι | otal of all property | on Schedule A        | <b>B.</b> Add line 55 + line 6 | J <b>Z</b>                     |   |   | \$136,295.00  |

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| Fill in this in     | formation to identi    | y your case:                       |                 |
|---------------------|------------------------|------------------------------------|-----------------|
| Debtor 1            | Rhonda                 | Herlett                            | Johnson         |
|                     | First Name             | Middle Name                        | Last Name       |
| Debtor 2            |                        |                                    |                 |
| (Spouse, if filing) | First Name             | Middle Name                        | Last Name       |
| United States       | Bankruptcy Court for t | ne : <u>NORTHERN</u> District of _ | ILLINOIS(State) |
| Case Number         |                        |                                    | (Otato)         |
| (If known)          |                        |                                    |                 |

# Official Form 106C

#### Schedule C: The Property You Claim as Exempt

04/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions-such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds-may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

| Part 1: Identify the Property You Claim as Exemp  |                                      |   |                                    |  |  |  |  |  |  |  |  |  |
|---|--------------------------------------|---|------------------------------------|--|--|--|--|--|--|--|--|--|
| 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.  |                                      |   |                                    |  |  |  |  |  |  |  |  |  |
| You are claiming state and federal nonbankruptcy exemptions . 11 U.S.C. § 522(b)(3)                   |                                      |   |                                    |  |  |  |  |  |  |  |  |  |
| You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)  |                                      |   |                                    |  |  |  |  |  |  |  |  |  |
|   |                                      |   |                                    |  |  |  |  |  |  |  |  |  |
| 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below. |                                      |   |                                    |  |  |  |  |  |  |  |  |  |
| Brief description of the property and line on Schedule A/B that lists this property                   | Current value of the portion you own | Amount of the exemption you claim                               | Specific laws that allow exemption |  |  |  |  |  |  |  |  |  |
|   | Copy the value from<br>Schedule A/B  | Check only one box for each exemption                           |                                    |  |  |  |  |  |  |  |  |  |
| Brief 3501 Doria Lane Olympia Fields IL description: 60461 - Primary Residence                        | \$_ 110,000                          | \$1,500   | 735 ILCS 5/12-901                  |  |  |  |  |  |  |  |  |  |
| Line from Schedule A/B: 01  |                                      | 100% of fair market value, up to any applicable statutory limit |                                    |  |  |  |  |  |  |  |  |  |
| Brief 2011 Bmw 325 with over 126,000 description: miles.  | \$ <u>10,845</u>                     | \$ _ 2,400  | 735 ILCS 5/12-1001(c)              |  |  |  |  |  |  |  |  |  |
| Line from Schedule A/B: 03  |                                      | 100% of fair market value, up to any applicable statutory limit |                                    |  |  |  |  |  |  |  |  |  |
| Brief Furniture, linens, small appliances description: and bedroom set                                | \$_2,000                             | \$ _ 2,000  | 735 ILCS 5/12-1001(b)              |  |  |  |  |  |  |  |  |  |
| Line from Schedule A/B: 06  |                                      | 100% of fair market value, up to any applicable statutory limit |                                    |  |  |  |  |  |  |  |  |  |
| Brief Flat screen TV, computer and cell description: phone  | \$ <u>500</u>                        | \$_500  | 735 ILCS 5/12-1001(b)              |  |  |  |  |  |  |  |  |  |
| Line from  Schedule A/B: 07  any applicable statutory limit  Schedule A/B: 07                         |                                      |   |                                    |  |  |  |  |  |  |  |  |  |
|   |                                      |   |                                    |  |  |  |  |  |  |  |  |  |
| Official Form 106C Record # 791978  | Schedule C: T                        | he Property You Claim as Exempt                                 | Page 1 of 2                        |  |  |  |  |  |  |  |  |  |

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Page 17 of 59 Number (if known) Rhonda Herlett Debtor 1 Last Name First Name Middle Name

|         | aπ 2⊪ Additi   | onal Page  |                                      |   |                                    |
|---------|--|--|--------------------------------------|---|------------------------------------|
|         | •  | n of the property and line on<br>nat lists this property | Current value of the portion you own | Amount of the exemption you claim                               | Specific laws that allow exemption |
|         |  |  | Copy the value from<br>Schedule A/B  | Check only one box for each exemption                           |                                    |
|         | Brief Everyday clothes and shoes description:                      |  | \$_500                               | \$_500  | 735 ILCS 5/12-1001(a),(e)          |
|         | Line from Schedule A/B:  | 11   |                                      | 100% of fair market value, up to any applicable statutory limit |                                    |
|         | Brief description:   | Everyday jewelry   | \$ <u>250</u>                        | \$ _ 250  | 735 ILCS 5/12-1001(a),(e)          |
|         | Line from Schedule A/B:  | 12   |                                      | 100% of fair market value, up to any applicable statutory limit |                                    |
|         | Brief description:   | Books and Family Photos                                  | \$ <u>100</u>                        | \$_100  | 735 ILCS 5/12-1001(a)              |
|         | Line from Schedule A/B:  | 14   |                                      | 100% of fair market value, up to any applicable statutory limit |                                    |
|         | Brief description:   | Checking Account, TCF Bank                               | \$_800                               | \$_800  | 735 ILCS 5/12-1001(b)              |
|         | Line from Schedule A/B:  | <u>17</u>  |                                      | 100% of fair market value, up to any applicable statutory limit |                                    |
|         | Brief Savings Account, TCF Bank description:                       |  | \$_3,000                             | \$_700  | 735 ILCS 5/12-1001(b)              |
|         | Line from Schedule A/B:  | <u>17</u>  |                                      | 100% of fair market value, up to any applicable statutory limit |                                    |
|         | Brief Pension plan, State of Illinois, description: 100% exempt \$ |  | \$Unknown                            | \$  | 735 ILCS 5/12-1006                 |
|         | Line from Schedule A/B:  | 21   |                                      | 100% of fair market value, up to any applicable statutory limit |                                    |
|         | Brief description:   | Term life insurance - no cash surrender value.           | \$ <u>0</u>                          | \$_0  | 735 ILCS 5/12-1001(f)              |
|         | Line from Schedule A/B:  | 31   |                                      | 100% of fair market value, up to any applicable statutory limit |                                    |
| 3.      | Are you claiming   | g a homestead exemption of more                          | than \$160,375?                      |   |                                    |
|         | (Subject to adjus  | tment on 4/01/19 and every 3 years                       | after that for cases filed on        | or after the date of adjustment .)                              |                                    |
|         | No.  |  |                                      |   |                                    |
|         | Yes. Did you   | acquire the property covered by the                      | e exemption within 1,215 day         | ys before you filed this case?                                  |                                    |
|         | □ No □ Yes.  |  |                                      |   |                                    |
|         |  |  |                                      |   |                                    |
|         |  |  |                                      |   |                                    |
|         |  |  |                                      |   |                                    |
|         |  |  |                                      |   |                                    |
|         |  |  |                                      |   |                                    |
|         |  |  |                                      |   |                                    |
|         |  |  |                                      |   |                                    |
| $\circ$ | fficial Form 106C  | Record # 791978  | Schodulo C: The                      | Property You Claim as Evennt                                    | Page 2 of 2                        |

| Fill in this in  | Caso 19<br>formation to ident                                  |   | oc 1 Filad 00  | V1∩/1Q               |                 | ed 09/10/18<br>8 of 59 | 3 17:22:19   | Desc Main                                    |                          |
|--|--|---|--|----------------------|-----------------|------------------------|--|--|--------------------------|
| Debtor 1   | Rhonda   | Herlett   | Jo   | ohnson               |                 |                        |  |  |                          |
|  | First Name   | Middle Name   | Las  | Name                 |                 |                        |  |  |                          |
| Debtor 2   |  |   |  |                      |                 |                        |  |  |                          |
| (Spouse, if filing)  | First Name   | Middle Name   | Las  | Name                 |                 |                        |  |  |                          |
| United States  | Bankruptcy Court for   | the : <u>NORTHERN</u>   | _ District of _ILLINOIS  |                      |                 |                        |  |  |                          |
| Case Number  |  |   | (St  | ate)                 |                 |                        |  | Check if this                                | s is an                  |
| (If known)   |  |   |  |                      |                 |                        |  | amended fil                                  | ing                      |
| Official F   | orm 106D   |   |  |                      |                 |                        |  |  |                          |
|  |  | s Who Have  | e Claims Secu  | ıred hv P            | ronert          | v                      |  |  | 12/15                    |
| nformation. If ridditional page  1. Do any cre  No. Ch  Yes. Fil | nore space is need<br>s, write your name<br>ditors have claims | ded, copy the Addit<br>and case number<br>secured by your p<br>ubmit this form to the<br>ation below. |  | number the en        | itries, and a   | attach it to this fo   | rm. On the top of a                                    | ny   |                          |
|  |  |   |  |                      |                 |                        | Column A   | Column A                                     | Column C                 |
| for each cl  | aim. If more than o  | one creditor has a p  | an one secured claim,<br>articular claim, list the o<br>al order according to the  | other creditors      | in Part 2.      |                        | Amount of claim  Do not deduct the value of collateral | Value of collateral that supports this claim | Unsecured portion If any |
| 2.1 Carring  | ton Mortgage SE  |   | Describe the prope   | erty that secure     | s the claim:    |                        | \$ <u>100,970.00</u>                                   | <b>\$</b> 110,000.00                         | \$_0.00                  |
| Creditor's   | Name   |   | 3501 Doria Lane (  | Olympia Fields       | IL 60461 -      | Primary                | ]  |  |                          |
|  | Douglass Rd Ste 2  |   | Residence  |                      |                 |                        |  |  |                          |
| Number   | Street   |   | A 544  | file die elektrick   | 01              | (b. c                  |  |  |                          |
|  |  |   | As of the date you  Contingent   | file, the claim is   | s: Check all    | that apply.            |  |  |                          |
| Anaheir  | n  | CA 92806  | Unliquidated   |                      |                 |                        |  |  |                          |
| City   |  | State Zip Code  | Disputed   |                      |                 |                        |  |  |                          |
| Who owes   | the debt? Check on   | e.  | Nature of Lien. Ch   | eck all that apply.  | <i>ı</i> .      |                        |  |  |                          |
| Debtor   | 1 only   |   | An agreement yo  | u made (such as      | s mortgage o    | r secured              |  |  |                          |
| Debtor   | 2 only   |   | car loan)  |                      |                 |                        |  |  |                          |
| Debtor   | 1 and Debtor 2 only  |   | Statutory lien (su   | ch as tax lien, me   | echanic's lier  | 1)                     |  |  |                          |
| At least   | one of the debtors an  | d another   | Judgment lien fro  | m a lawsuit          |                 |                        |  |  |                          |
| □ chast  | if this slains nalates   | 4   | Other (including   | a right to offset) _ |                 |                        |  |  |                          |
|  | if this claim relates<br>unity debt                            | to a  |  |                      |                 |                        |  |  |                          |
|  | -  | 2016-2018   | Last 4 digits of acc   | ount number _        | 1236            |                        |  |  |                          |
| Part 2:  | List Others to Be No   | otified for a Debt Tha  | at You Already Listed  |                      |                 |                        |  |  |                          |
| Ilaa Ahio  |  | un to be notified.  |  | a dalak (li -t -     | u alma culturil | And in David 4 Fr      |  |  |                          |
| trying to collect  | t from you for a deb   | t you owe to someonts that you listed in  | out your bankruptcy for<br>ne else, list the creditor<br>Part 1, list the addition | in Part 1, and t     | then list the   | collection agency      | here. Similarly, if yo                                 | u have more                                  |                          |
|  |  |   |  |                      |                 |                        |  |  |                          |

|                                 |  | Caso 19 25/57  |   | Eilod 00  | /10/19   |   | 8 17:22:19                                     | Desc Main                   |                  |
|---------------------------------|--|--|---|---|--|---|--|-----------------------------|------------------|
| Fill                            | l in this inf  | ormation to identify your cas  | se:   |   |  | 9 of 59   |  |                             |                  |
| De                              | ebtor 1  | Rhonda   | Herlett   | Jo  | hnson  |   |  |                             |                  |
|                                 |  | First Name   | Middle Name   | Last N  | lame   |   |  |                             |                  |
|                                 | ebtor 2  |  |   |   |  |   |  |                             |                  |
| (Sp                             | ouse, if filing)                                     | First Name M   | Middle Name   | Last N  | lame   |   |  |                             |                  |
| Un                              | ited States E  | Bankruptcy Court for the : <u>NOR</u>  | THERN_ Distr  |   |  |   |  |                             |                  |
| Ca                              | se Number  |  |   | (Stat   | e)   |   |  | Check if                    | this is an       |
| (If                             | known)   |  |   |   |  |   |  | amende                      | d filing         |
| <u>Offi</u>                     | <u>cial Fo</u>                                       | orm 106E/F   |   |   |  |   |  |                             |                  |
| sch                             | edule  | E/F: Creditors Wh  | o Have  | Unsecured   | Claims   |   |  |                             | 12/15            |
| /B: F<br>redit<br>eede<br>op of | Property (Coors with particular, copy the any additi | orty to any executory contractificial Form 106A/B) and on artially secured claims that are Part you need, fill it out, nu onal pages, write your name ist All of Your PRIORITY Unsec | Schedule G:<br>re listed in S<br>mber the en<br>and case nu | Executory Contra<br>chedule D: Credito<br>tries in the boxes        | cts and Unexp<br>ors Who Have                          | ired Leases (Official Form<br>Claims Secured by Prope   | n 106G). Do not inclu<br>rty. If more space is | ude any                     |                  |
| 1. <b>D</b>                     | o any cred   | litors have priority unsecured   | d claims aga  | inst you?   |  |   |  |                             |                  |
|                                 | _  | to Part 2.   |   |   |  |   |  |                             |                  |
| -                               | Yes.   | to Fair 2.   |   |   |  |   |  |                             |                  |
| e<br>n<br>u                     | ach claim I<br>onpriority a<br>nsecured c            | our priority unsecured claims<br>isted, identify what type of clai<br>amounts. As much as possible<br>claims, fill out the Continuation  | im it is. If a cl<br>, list the clain<br>Page of Par        | aim has both priori<br>ns in alphabetical c<br>t 1. If more than on | ty and nonprior<br>order according<br>e creditor holds | ity amounts, list that claim I<br>to the creditor's name. If yo<br>s a particular claim, list the | nere and show both pour have more than to      | priority and<br>wo priority |                  |
| 1)                              | -or an expi  | anation of each type of claim,   | see the instr   | uctions for this forn   | in the instruct  | ion booklet.)   | Total claim                                    | Priority                    | Nonpriority      |
|                                 |  |  |   |   |  |   |  | amount                      | amount           |
| Pa                              | rt 2:  | ist All of Your NONPRIORITY U  | nsecured Cla  | nims  |  |   |  |                             |                  |
| 3. <b>D</b>                     | o any cred   | litors have nonpriority unsec  | ured claims   | against you?  |  |   |  |                             |                  |
|                                 | No. You  | have nothing to report in this   | part. Submi   | t this form to the co   | ourt with your of                                      | her schedules.  |  |                             |                  |
|                                 | Yes.   |  |   |   |  |   |  |                             |                  |
| n<br>in                         | onpriority uncluded in F                             | our nonpriority unsecured cla<br>insecured claim, list the credit<br>Part 1. If more than one credit<br>it the Continuation Page of Pa   | or separately<br>or holds a pa                              | for each claim. Fo  | r each claim lis                                       | ted, identify what type of cla  | aim it is. Do not list c                       | laims already               |                  |
|                                 | -  | · ·  |   |   |  |   |  |                             | Total claim      |
| 4.1                             | Capital C  |  | '   | Last 4 digits of acco   | unt number   | NULL  |  |                             | \$ <u>175.00</u> |
|                                 |  | Riverwoods Blvd  | \   | When was the debt   | incurred?  | 2017-2018   |  |                             |                  |
|                                 | Number   | Street   |   |   |  |   |  |                             |                  |
|                                 |  |  |   | ¬ ·   | ile, the claim is:                                     | Check all that apply.   |  |                             |                  |
|                                 | Mettawa  | IL 6004  | L<br>15 г   | Contingent  |  |   |  |                             |                  |
| ,                               | City   | State Zip C  | ode [   | Unliquidated Disputed   |  |   |  |                             |                  |
| ,                               | Debtor 1   | the debt? Check one.   | L   | Siepateu  |  |   |  |                             |                  |
|                                 | Debtor 2   | •  | 1   | Type of NONPRIOR  | ITY unsecured  | claim:  |  |                             |                  |
|                                 | =  | and Debtor 2 only  |   | Student loans.  |  |   |  |                             |                  |
|                                 | =  | one of the debtors and another   | Ī   | Obligations arising   | out of a separati                                      | on agreement or divorce   |  |                             |                  |
|                                 | _  | f this claim relates to a  | -   | that you did not re   |  |   |  |                             |                  |
|                                 |  | nity debt<br>n subject to offest?  | L   | Debts to pension of   | r profit-sharing p                                     | lans, and other similar debts   |  |                             |                  |
|                                 | No No  | . Judject to Oliest:   |   | Other. Specify  | Credit Card or   | Credit Use  |  |                             |                  |
|                                 | Yes  |  |   | Ошег. эреспу  | S. San Gara Of   |   |  |                             |                  |

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| After li | sting any entries on this page, number them b      | eginning with 4.4, followed by 4.5, and so forth.                   | Total Claim        |
|----------|--|---|--------------------|
| 4.2      | Capitalone   | Last 4 digits of account number NULL                                | \$ <u>2,483.00</u> |
| <u> </u> | Creditor's Name                                    | <del></del>   |                    |
|          | 15000 Capital One Dr                               | When was the debt incurred? 2015-2018                               |                    |
|          | Number Street                                      |   |                    |
|          |  | As of the date you file, the claim is: Check all that apply.        |                    |
|          |  | Contingent  |                    |
|          | Richmond VA 23238                                  | Unliquidated  |                    |
| l .      | City State Zip Code                                | Disputed  |                    |
| '        | Vho owes the debt? Check one.                      | Disputed  |                    |
|          | Debtor 1 only                                      |   |                    |
| إ        | Debtor 2 only                                      | Type of NONPRIORITY unsecured claim:                                |                    |
| <u> </u> | Debtor 1 and Debtor 2 only                         | Student loans.  |                    |
| [        | At least one of the debtors and another            | Obligations arising out of a separation agreement or divorce        |                    |
|          | Check if this claim relates to a                   | that you did not report as priority claims                          |                    |
| l .      | community debt                                     | Debts to pension or profit-sharing plans, and other similar debts   |                    |
|          | s the claim subject to offest?                     | <u>_</u>  |                    |
|          | ■ No   | Other. Specify Credit Card or Credit Use                            |                    |
|          | Yes  |   | 101100             |
| 4.3      | City of Harvey                                     | Last 4 digits of account number                                     | \$ <u>1,244.00</u> |
|          | Creditor's Name                                    | When was the debt incurred?   |                    |
|          | 15320 Broadway Ave                                 | when was the debt incurred?   |                    |
|          | Number Street                                      |   |                    |
|          |  | As of the date you file, the claim is: Check all that apply.        |                    |
|          | H  | Contingent  |                    |
|          | Harvey IL 60426                                    | Unliquidated  |                    |
| v        | City State Zip Code  Who owes the debt? Check one. | Disputed  |                    |
|          | Debtor 1 only                                      | _   |                    |
| li       | Debtor 2 only                                      | Type of NONPRIORITY unsecured claim:                                |                    |
| l i      | Debtor 1 and Debtor 2 only                         | Student loans.  |                    |
|          | At least one of the debtors and another            | Obligations arising out of a separation agreement or divorce        |                    |
|          | =  | that you did not report as priority claims                          |                    |
| 1        | Check if this claim relates to a community debt    | Debts to pension or profit-sharing plans, and other similar debts   |                    |
| 1        | s the claim subject to offest?                     | sold to position of profit of all my plants, and other comman doors |                    |
|          | No   | Other. Specify  |                    |
| [        | Yes  | Cution opposity   |                    |
| 4.4      | Homeq Servicing                                    | Last 4 digits of account number 4330                                | \$ 0.00            |
| <u> </u> | Creditor's Name                                    | <del></del>   |                    |
|          | Po Box 13716                                       | When was the debt incurred? 2006-2010                               |                    |
|          | Number Street                                      |   |                    |
|          |  | As of the date you file, the claim is: Check all that apply.        |                    |
|          |  | Contingent  |                    |
|          | Sacramento CA 95853                                | Unliquidated  |                    |
|          | City State Zip Code                                | ☐ Disputed  |                    |
| \ \ \\   | Vho owes the debt? Check one.                      | Disputed  |                    |
|          | Debtor 1 only                                      |   |                    |
| <u> </u> | Debtor 2 only                                      | Type of NONPRIORITY unsecured claim:                                |                    |
| [        | Debtor 1 and Debtor 2 only                         | Student loans.  |                    |
| [        | At least one of the debtors and another            | Obligations arising out of a separation agreement or divorce        |                    |
|          | Check if this claim relates to a                   | that you did not report as priority claims                          |                    |
|          | community debt                                     | Debts to pension or profit-sharing plans, and other similar debts   |                    |
|          | s the claim subject to offest?                     | _   |                    |
|          | No   | Other. Specify  |                    |
|          | Yes  |   |                    |

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Your NONPRIORITY Unsecured Claims - Continuation Page

| After I | isting any entries on this page, number them be    | eginning with 4.4, followed by 4.5, an  | d so forth.                  | Total Claim         |
|---------|--|---|------------------------------|---------------------|
| 4.5     | Nordstrom/TD BANK USA                              | Last 4 digits of account number         | NULL                         | \$ <u>613.00</u>    |
|         | Creditor's Name                                    | _                                       |                              |                     |
|         | 13531 E Caley Ave                                  | When was the debt incurred?             | 2012-2018                    |                     |
|         | Number Street                                      |   |                              |                     |
|         |  | As of the date you file, the claim is:  | Check all that apply.        |                     |
|         |  | Contingent                              |                              |                     |
|         | Englewood CO 80111                                 | Unliquidated                            |                              |                     |
|         | City State Zip Code                                | Disputed                                |                              |                     |
| · '     | Who owes the debt? Check one.                      | Disputed                                |                              |                     |
|         | Debtor 1 only                                      |   |                              |                     |
|         | Debtor 2 only                                      | Type of NONPRIORITY unsecured of        | elaim:                       |                     |
|         | Debtor 1 and Debtor 2 only                         | Student loans.                          |                              |                     |
|         | At least one of the debtors and another            | Obligations arising out of a separation |                              |                     |
|         | Check if this claim relates to a                   | that you did not report as priority cla |                              |                     |
|         | community debt                                     | Debts to pension or profit-sharing pl   | ans, and other similar debts |                     |
|         | Is the claim subject to offest?                    |   | Des divides                  |                     |
|         | No No  | Other. Specify Credit Card or 0         | Gredit Use                   |                     |
|         | Yes  |   | 0446                         | ♠ E2 E27 00         |
| 4.6     | OCWEN  | Last 4 digits of account number         | 9446                         | \$ <u>52,537.00</u> |
|         | Creditor's Name Po Box 24646                       | When was the debt incurred?             | 2006-2018                    |                     |
|         | Number Street                                      | When was the debt incurred:             |                              |                     |
|         | Number Street                                      |   |                              |                     |
|         |  | As of the date you file, the claim is:  | Check all that apply.        |                     |
|         | West Palm Beach FL 33416                           | Contingent                              |                              |                     |
|         | City State Zip Code                                | Unliquidated                            |                              |                     |
| ,       | Who owes the debt? Check one.                      | Disputed                                |                              |                     |
|         | Debtor 1 only                                      |   |                              |                     |
|         | Debtor 2 only                                      | Type of NONPRIORITY unsecured of        | elaim:                       |                     |
|         | Debtor 1 and Debtor 2 only                         | Student loans.                          |                              |                     |
|         | At least one of the debtors and another            | Obligations arising out of a separation | on agreement or divorce      |                     |
|         | Check if this claim relates to a                   | that you did not report as priority cla |                              |                     |
|         | community debt                                     | Debts to pension or profit-sharing pl   |                              |                     |
|         | ls the claim subject to offest?                    |   |                              |                     |
|         | No   | Other. Specify                          |                              |                     |
|         | Yes  | _                                       |                              |                     |
| 4.7     | Select Portfolio Svcin                             | Last 4 digits of account number         | 0085                         | \$ <u>0.00</u>      |
|         | Creditor's Name                                    |   | 0000 0000                    |                     |
|         | Po Box 65250                                       | When was the debt incurred?             | 2006-2009                    |                     |
|         | Number Street                                      |   |                              |                     |
|         |  | As of the date you file, the claim is:  | Check all that apply.        |                     |
|         |  | Contingent                              |                              |                     |
|         | Salt Lake City UT 84165                            | Unliquidated                            |                              |                     |
| Ι,      | City State Zip Code  Who owes the debt? Check one. | Disputed                                |                              |                     |
|         |  | <b>—</b> ·                              |                              |                     |
|         | Debtor 1 only                                      | Town of MONDPIONITY                     | Letro                        |                     |
|         | Debtor 2 only                                      | Type of NONPRIORITY unsecured of        | oaim:                        |                     |
|         | Debtor 1 and Debtor 2 only                         | Student loans.                          | nn agreement er diverse      |                     |
|         | At least one of the debtors and another            | Obligations arising out of a separation |                              |                     |
|         | Check if this claim relates to a                   | that you did not report as priority cla |                              |                     |
|         | community debt Is the claim subject to offest?     | Debts to pension or profit-sharing pl   | ans, and other similar dedts |                     |
|         | No   | 0,000                                   |                              |                     |
|         | Yes  | Other. Specify                          |                              |                     |
|         | <b>□</b> 1 <sup>103</sup>                          |   |                              |                     |

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Your NONPRIORITY Unsecured Claims - Continuation Page

| After | listing any entries on this page, number them b    | eginning with 4.4, followed by 4.5, a     | nd so forth.                     | Total Claim         |
|-------|--|---|----------------------------------|---------------------|
| 4.8   | Specialized LOAN Servi                             | Last 4 digits of account number _         | 4580                             | <b>\$</b> 20,017.00 |
|       | Creditor's Name                                    |   |                                  |                     |
|       | 8742 Lucent Blvd Ste 300                           | When was the debt incurred?               | 2006-2018                        |                     |
|       | Number Street                                      |   |                                  |                     |
|       |  | As of the date you file, the claim is     | : Check all that apply.          |                     |
|       |  | Contingent                                |                                  |                     |
|       | Highlands Ranch CO 80129                           | Unliquidated                              |                                  |                     |
|       | City State Zip Code                                | Disputed                                  |                                  |                     |
|       | Who owes the debt? Check one.                      | Disputed                                  |                                  |                     |
|       | Debtor 1 only                                      |   |                                  |                     |
|       | Debtor 2 only                                      | Type of NONPRIORITY unsecured             | claim:                           |                     |
|       | Debtor 1 and Debtor 2 only                         | Student loans.                            |                                  |                     |
|       | At least one of the debtors and another            | Obligations arising out of a separat      | -                                |                     |
|       | Check if this claim relates to a                   | that you did not report as priority cl    |                                  |                     |
|       | community debt                                     | Debts to pension or profit-sharing p      | plans, and other similar debts   |                     |
|       | Is the claim subject to offest?                    | _   |                                  |                     |
|       | No No  | Other. Specify                            |                                  |                     |
|       | L_Yes 1 Symph HOME                                 |   | NII II I                         | <b>*</b> 600 00     |
| 4.9   | Syncb HOME   | Last 4 digits of account number _         | NULL                             | \$ <u>600.00</u>    |
|       | Creditor's Name Po Box 965036                      | When was the debt incurred?               | 2016-2018                        |                     |
|       | Number Street                                      | When was the dest meaned:                 | <del></del>                      |                     |
|       | Number Street                                      |   |                                  |                     |
|       |  | As of the date you file, the claim is     | : Check all that apply.          |                     |
|       | Orlando FL 32896                                   | Contingent                                |                                  |                     |
|       |  | Unliquidated                              |                                  |                     |
|       | City State Zip Code  Who owes the debt? Check one. | Disputed                                  |                                  |                     |
|       | Debtor 1 only                                      |   |                                  |                     |
|       | Debtor 2 only                                      | Type of NONPRIORITY unsecured             | claim:                           |                     |
|       | Debtor 1 and Debtor 2 only                         | Student loans.                            |                                  |                     |
|       | At least one of the debtors and another            | Obligations arising out of a separat      | tion agreement or divorce        |                     |
|       | Check if this claim relates to a                   | that you did not report as priority cl    | -                                |                     |
|       | community debt                                     | Debts to pension or profit-sharing p      |                                  |                     |
|       | Is the claim subject to offest?                    | Debte to periodicit of profit straining p | Statio, and other diffinal doors |                     |
|       | No   | Other. Specify Credit Card or             | Credit Use                       |                     |
|       | Yes  | Salon Specify                             | <del></del>                      |                     |
| 4.10  | Syncb/ART VAN FURNITUR                             | Last 4 digits of account number _         | NULL                             | <b>\$</b> 450.00    |
|       | Creditor's Name                                    | -   |                                  |                     |
|       | 950 Forrer Blvd                                    | When was the debt incurred?               | 2017-2018                        |                     |
|       | Number Street                                      |   |                                  |                     |
|       |  | As of the date you file, the claim is     | : Check all that apply.          |                     |
|       |  | Contingent                                |                                  |                     |
|       | Kettering OH 45420                                 | Unliquidated                              |                                  |                     |
|       | City State Zip Code                                | Disputed                                  |                                  |                     |
|       | Who owes the debt? Check one.                      | L Disputed                                |                                  |                     |
|       | Debtor 1 only                                      |   |                                  |                     |
|       | Debtor 2 only                                      | Type of NONPRIORITY unsecured             | claim:                           |                     |
|       | Debtor 1 and Debtor 2 only                         | Student loans.                            |                                  |                     |
|       | At least one of the debtors and another            | Obligations arising out of a separat      | -                                |                     |
|       | Check if this claim relates to a                   | that you did not report as priority cl    |                                  |                     |
|       | community debt                                     | Debts to pension or profit-sharing p      | plans, and other similar debts   |                     |
|       | Is the claim subject to offest?                    | <u></u>                                   |                                  |                     |
|       | No   | Other. Specify Credit Card or             | Credit Use                       |                     |
|       | Yes  |   |                                  |                     |

Case 18-25457 Doc 1 Filed 09/10/18 Entered 09/10/18 17:22:19 Desc Main Page 23 of 59 Case Number (if known) Document Rhonda Debtor 1 First Name \$ 0.00 US Bank NA 4.11 Last 4 digits of account number Creditor's Name PO Box 5229 When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated City State Zip Code Disputed Who owes the debt? Check one. Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Student loans. Debtor 1 and Debtor 2 only At least one of the debtors and another Obligations arising out of a separation agreement or divorce that you did not report as priority claims Check if this claim relates to a community debt Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offest? Other. Specify \_\_\_Mortgage Deficiency Yes List Others to Be Notified for a Debt That You Already Listed Part 3: 5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page. Codilis & Associates, PC, 18CH00978 On which entry in Part 1 or Part 2 list the original creditor? Name 15W030 N. Frontage Rd. #100 Line 6 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Number Burr Ridge Last 4 digits of account number \_\_\_\_ 9446 City State Zip Code Clerk, Chancery, 18CH00978 On which entry in Part 1 or Part 2 list the original creditor? Line  $\underline{6}$  of (Check one): Part 1: Creditors with Priority Unsecured Claims 50 W. Washington St., Room 802 Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number \_\_\_\_ Chicago IL 60602 State Zip Code Clerk, Chancery, 18CH978 On which entry in Part 1 or Part 2 list the original creditor? 50 W. Washington St., Room 802 Part 1: Creditors with Priority Unsecured Claims Line 11 of (Check one):

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Rhonda Debtor 1

Herlett

Add the Amounts for Each Type of Unsecured Claim

Document

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6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

|                             |  |            | Total claim |
|-----------------------------|--|------------|-------------|
| Total claims from Part 1    | 6a. Domestic support obligations   | 6a.        | \$0.00      |
|                             | 6b. Taxes and Certain other debts you owe the government   | 6b.        | \$0.00      |
|                             | 6c. Claims for death or personal injury while you were intoxicated   | 6c.        | \$0.00      |
|                             | 6d. <b>Other.</b> Add all other priority unsecured claims.  Write that amount here.  | 6d.        | \$0.00      |
|                             | 6e. <b>Total.</b> Add lines 6a through 6d.   | 6e.        | \$0.00      |
|                             |  |            |             |
|                             |  |            | Total claim |
| Total claims<br>from Part 2 | 6f. Student loans  | 6f.        | Total claim |
|                             | 6f. Student loans  6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims   | 6f.<br>6g. | 0.00        |
|                             | 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority   |            | \$0.00      |
|                             | <ul> <li>6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> <li>6h. Debts to pension or profit-sharing plans, and other</li> </ul> | 6g.        | \$          |

| Fi                        | II in this int   | Caso 19<br>formation to iden   |  | Glad 00/10/19  | Entor  | ed 09/10/18 17:22   | :19         | Desc Main        |       |
|---------------------------|--|--|--|--|--|---|-------------|------------------|-------|
|                           |  | ormation to lacin  | ary your case.   |  |  | 5 of 59   |             |                  |       |
| D                         | ebtor 1  | Rhonda<br>First Name   | Herlett  Middle Name   | Johnson<br>Last Name   | -  |   |             |                  |       |
| D                         | ebtor 2  | riistivaille   | Middle Name  | Last Name  | _  |   |             |                  |       |
| (S                        | pouse, if filing)  | First Name   | Middle Name  | Last Name  |  |   |             |                  |       |
| U                         | nited States   | Bankruptcy Court for   | r the : <u>NORTHERN</u> District of _  |  |  |   |             |                  |       |
|                           | ase Number   |  |  | (State)  |  |   |             | Check if this is |       |
|                           | f known)   | 1000   |  |  |  |   |             | amended filing   |       |
| <u>Off</u>                | <u>icial Fo</u>  | orm 106G   |  |  |  |   |             |                  | 12/15 |
| Be as informaddition 1. [ | complete mation. If m ional pages oo you hav No. Cho Yes. Fill ist separat | and accurate as pore space is needs, write your name any executory of each this box and so in all of the informall each person of each person of the informall each person of the informal each per | possible. If two married people ded, copy the additional page, e and case number (if known). contracts or unexpired leases? submit this form to the court with mation below even if the contract or company with whom you ha | are filing together, bot<br>fill it out, number the e<br>your other schedules. Y<br>is or leases are listed in<br>we the contract or lease | h are equal ntries, and  ou have not Schedule A. | hing else to report on this form  /B: Property (Official Form 106)  what each contract or lease | n.<br>6A/B) | r                |       |
| u                         | nexpired le  | ases.  | cell phone). See the instruction   |  | TUCTION DOOR                                     | State what the contract   | ·           |                  |       |
| 2.1                       |  |  |  |  |  |   |             |                  |       |
| 2.1                       | Name   |  |  |  | -  |   |             |                  |       |
|                           | Number   | Street   |  |  | _  |   |             |                  |       |
|                           |  |  |  |  | _  |   |             |                  |       |
|                           | City   |  | State Zip  | Code   |  |   |             |                  |       |
| 2.2                       |  |  |  |  | _  |   |             |                  |       |
|                           | Name   |  |  |  |  |   |             |                  |       |
|                           | Number   | Street   |  |  | _  |   |             |                  |       |
|                           | City   |  | State Zip  | Code   | -  |   |             |                  |       |
| 2.3                       |  |  |  |  |  |   |             |                  |       |
|                           | Name   |  |  |  | _  |   |             |                  |       |
|                           | Number   | Street   |  |  | _  |   |             |                  |       |
|                           | City   |  | State Zip (  | Code   | _  |   |             |                  |       |
|                           |  |  | ·  |  |  |   |             |                  |       |
| 2.4                       |  |  |  |  | _  |   |             |                  |       |
|                           | Name   |  |  |  | _  |   |             |                  |       |
|                           | Number   | Street   |  |  |  |   |             |                  |       |
|                           | City   |  | State Zip (  | Code   | _  |   |             |                  |       |
| 2.5                       |  |  |  |  |  |   |             |                  |       |
|                           | Name   |  |  |  | _  |   |             |                  |       |
|                           | Number   | Street   |  |  | _  |   |             |                  |       |
|                           |  |  |  |  |  |   |             |                  |       |

State Zip Code

City

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| Fill in this in     | formation to identi    | fy your case:                       |                 |
|---------------------|------------------------|-------------------------------------|-----------------|
| Debtor 1            | Rhonda                 | Herlett                             | Johnson         |
|                     | First Name             | Middle Name                         | Last Name       |
| Debtor 2            |                        |                                     |                 |
| (Spouse, if filing) | First Name             | Middle Name                         | Last Name       |
| United States       | Bankruptcy Court for t | the : <u>NORTHERN</u> District of _ | ILLINOIS(State) |
| Case Number         | r                      |                                     | (State)         |
| (If known)          |                        |                                     |                 |

# Official Form 106H

Schedule H: Your Codebtors 12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

| any A       | dditional Pages, wr | te your name and case numbe  | r (if known). Answer every     | question.           |  |
|-------------|---------------------|--|--------------------------------|---------------------|--|
| 1. <b>D</b> | o you have any coo  | ebtors? (If you are filing a joint                                       | case, do not list either spous | se as a codebtor.)  |  |
|             | No.                 |  |                                |                     |  |
|             | Yes                 |  |                                |                     |  |
|             | =                   | s, have you lived in a commur<br>aho, Lousiiana, Nevada, New M           |                                |                     | roperty states and territories include<br>Visconsin.)                            |
|             | No. Go to line 3.   |  |                                |                     |  |
|             | Yes. Did your sp    | ouse, former spouse, or legal ec   | uivalent live with you at the  | time?               |  |
|             | _                   | n community state or territory die                                       | d you live?                    | Fill in the n       | ame and current address of that person.  |
|             | Name of your spo    | use, former spouse or legal equivalent                                   |                                |                     |  |
|             | Number St           | reet   |                                |                     |  |
|             | City                |  | State                          | Zip Code            |  |
| 3 In        | -                   | f vour codebtors. Do not inclu   |                                | •                   | is filing with you. List the person  |
|             |                     | Form 106D), Schedule E/F (Off<br>edule G to fill out Column 2.<br>debtor | icial Form 106E/F), or Sche    | dule G (Official Fo | Column 2: The creditor to whom you owe the debt  Check all schedules that apply: |
| 3.1         |                     |  |                                |                     | Schedule D, line   |
|             | Name                |  |                                | _                   | Schedule E/F, line   |
|             | Number Stre         | et   |                                |                     | Schedule G, line   |
|             | City                | S  | tate Z                         | Zip Code            |  |
| 3.2         |                     |  |                                | _                   | Schedule D, line   |
|             | Name                |  |                                | _                   | Schedule E/F, line   |
|             | Number Stre         | et   |                                | _                   | Schedule G, line   |
|             | City                | S  | tate Z                         | Zip Code            | _  |
| 3.3         |                     |  |                                | _                   | Schedule D, line   |
|             | Name                |  |                                | _                   | Schedule E/F, line   |
|             | Number Stre         | et   |                                |                     | Schedule G, line   |
|             | City                | S  | tate Z                         | Zip Code            |  |

Official Form 106H Record # 791978 Schedule H: Your Codebtors Page 1 of 1

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| nformation to ident |   |                        |
|---------------------|---|------------------------|
| Rhonda              | Herlett Middle Name                               | Johnson<br>Last Name   |
|                     |   |                        |
| First Name          |   | Last Name              |
|                     |   | OF ILLINOIS            |
|                     |   | <u> </u>               |
|                     |   |                        |
|                     | Rhonda First Name First Name Bankruptcy Court for | First Name Middle Name |

Official Form 106I

MM / DD / YYYY

#### **Schedule I: Your Income**

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Pa | Tt1: Describe Employment  |   |                                     |              |                                   |
|----|---|---|-------------------------------------|--------------|-----------------------------------|
| 1. | Fill in your employment information   |   | Debtor 1                            |              | Debtor 2 or non-filing spouse     |
|    | If you have more than one job, attach a separate page with information about additional employers.  | Employment status   | X Employed Not employed             |              | Employed  Not employed            |
|    | Include part-time, seasonal, or self-employed work.   | Occupation  | Auditor                             |              |                                   |
|    | Occupation may Include student or homemaker, if it applies.   | Employers name Employers address                                      | 101 W. Jefferson I                  |              |                                   |
|    |   | How long employed there?  | Springfield, IL 627 Since 11/1/2004 | 702          | ,                                 |
| Pa | Estimate monthly income as of the spouse unless you are separated. If you or your non-filing spouse has lines below. If you need more space | the date you file this form. If you have more than one employer, comb | ine the information for a           |              | , G                               |
|    |   |   |                                     | For Debtor 1 | For Debtor 2 or non-filing spouse |
| 2. |   | y and commissions (before all pa<br>calculate what the monthly wage w | •                                   | \$7,228.00   | \$0.00                            |
| 3. | Estimate and list monthly overti  | me pay.   |                                     | \$0.00       | \$0.00                            |
| 4. | Calculate gross income. Add line  | e 2 + line 3.   |                                     | \$7,228.00   | \$0.00                            |

Official Form 106I Record # 791978 Schedule I: Your Income Page 1 of 2

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Rhonda Herlett Debtor 1

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First Name Middle Name Last Name For Debtor 1 For Debtor 2 or non-filing spouse \$7,228.00 \$0.00 5. List all payroll deductions: 5a. Tax, Medicare, and Social Security deductions \$0.00 5a \$1,958.24 5b. Mandatory contributions for retirement plans 5b. \$289.26 \$0.00 \$0.00 \$0.00 5c. Voluntary contributions for retirement plans 5c. 5d. Required repayments of retirement fund loans \$0.00 \$0.00 5d. \$195.58 \$0.00 5e. Insurance 5e 5f. Domestic support obligations \$0.00 5f \$0.00 5g. Union dues 5g. \$56.22 \$0.00 5h. Other deductions. Specify: 5h. \$0.00 \$0.00 6. **Add the payroll deductions**. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g +5h. \$2,499.30 \$0.00 6. 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$4,728.70 \$0.00 8. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8a \$0.00 \$0.00 Interest and dividends \$0.00 \$0.00 8b. Family support payments that you, a non-filing spouse, or a 8c. 8c. \$ 0.00 \$ 0.00 dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8d. Unemployment compensation 8d. \$0.00 \$0.00 **Social Security** 8e 8e. \$0.00 \$0.00 8f. Other government assistance that you regularly receive 8f. \$0.00 \$0.00 Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income 8g. \$0.00 \$0.00 Other monthly income. Specify: 8h. \$0.00 \$0.00 9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h. 9. \$0.00 \$0.00 Calculate monthly income. Add line 7 + line 9. 10. 10 \$4,728.70 \$0.00 \$4,728.70 Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. 11. \$0.00 Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. \$4,728.70 Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies Do you expect an increase or decrease within the year after you file this form? X No. Yes. Explain:

| Fill in this in              | formation to identify yo                      | ur case:  |   |  |  |                       |
|------------------------------|---|---|---|--|--|-----------------------|
| Debtor 1                     | Rhonda  | Herlett   | Johnson   | Check if this is:  |  |                       |
|                              | First Name                                    | Middle Name                                     | Last Name   | An amend   | •                                      |                       |
| Debtor 2 (Spouse, if filing) | First Name                                    | Middle Name                                     | Last Name   | _  | ent showing post<br>of the following o | t-petition chapter 13 |
| United States                | Bankruptcy Court for the : _                  | NORTHERN DISTRICT (                             | OF ILLINOIS   |  |  |                       |
| Case Number<br>(If known)    | r   |   |   | MM / DD /  | YYYY                                   |                       |
| Off: a: a l E                |   |   |   | A separate   | e filing for Debtor                    | 2 because Debtor 2    |
| Official F                   | orm 106J                                      |   |   | maintains :  | a separate house                       | ehold.                |
| Schedul                      | e J: Your Ex                                  | penses  |   |  |  | 12/15                 |
| -                            |   |   |   | are equally responsible for supply<br>ges, write your name and case nur    | -                                      |                       |
| Part 1:                      | Describe Your Household                       |   |   |  |  |                       |
|                              | Go to line 2.  Does Debtor 2 live in a s  No. | separate household?<br>t file a separate Schedu | lle J.  |  |  |                       |
| 2. Do you l                  | have dependents?                              | X No  |   | Dependent's relationship to  | Dependent's                            | Does dependent live   |
|                              | st Debtor 1 and                               |   | t this information for                                | Debtor 1 or Debtor 2   | age                                    | with you?             |
| Debtor 2                     |   | each deper                                      | ndent   |  |  | Yes                   |
| Do not si<br>names.          | tate the dependents'                          |   |   |  |  | X No                  |
|                              |   |   |   |  |  | Yes                   |
|                              |   |   |   |  |  | X <sub>No</sub>       |
|                              |   |   |   |  |  | Yes                   |
|                              |   |   |   |  |  | X No                  |
|                              |   |   |   |  |  | Yes                   |
|                              |   |   |   |  |  | X No                  |
|                              |   |   |   |  |  | Yes                   |
| _                            | expenses include<br>es of people other than   | X No  |   |  |  |                       |
| yourself                     | and your dependents?                          | Yes   |   |  |  |                       |
| Part 2:                      | Estimate Your Ongoing Mo                      | onthly Expenses                                 |   |  |  |                       |
| -                            |   |   |   | n as a supplement in a Chapter 13<br>, check the box at the top of the for |  |                       |
| the applicable               |   | , p.o., 10 1110 11 11 11 11 11 11 11 11 11 11 1 | . очррошения селошине о,                              |  |  |                       |
|                              | •   | _   | ance if you know the value Income (Official Form 106) | .)   | ,                                      | Your expenses         |
|                              |   |   |   |  |  |                       |
|                              | for the ground or lot.                        | xpenses for your resid                          | lence. Include first mortgage                         | e payments and   | 4.                                     | \$1,653.00            |
|                              | cluded in line 4:                             |   |   |  |  |                       |
| 4a. Re                       | eal estate taxes                              |   |   |  | 4a.                                    | \$0.00                |
| 4b. Pro                      | operty, homeowner's, or                       | renter's insurance                              |   |  | 4b.                                    | \$0.00                |
| 4c. Ho                       | ome maintenance, repair,                      | and upkeep expenses                             |   |  | 4c.                                    | \$50.00               |
| 4d. Ho                       | omeowner's association of                     | r condominium dues                              |   |  | 4d.                                    | \$0.00                |

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Case Number (if known) \_\_

\$

\$

20d.

20e

0.00

0.00

Document Rhonda Herlett

20d. Maintenance, repair, and upkeep expenses

20e. Homeowner's association or condominium dues

Debtor 1

First Name Middle Name Last Name Your expenses \$0.00 5 Additional Mortgage payments for your residence, such as home equity loans 6. **Utilities:** \$160.00 6a. 6a. Electricity, heat, natural gas \$60.00 6b. Water, sewer, garbage collection \$210.00 Telephone, cell phone, internet, satellite, and cable service \$ 0.00 Other. Specify: 6d. \$400.00 7. 7. Food and housekeeping supplies \$0.00 8. 8. Childcare and children's education costs \$50.00 9. Clothing, laundry, and dry cleaning 10. \$40.00 Personal care products and services 10. \$25.00 11. Medical and dental expenses 11. \$280.00 Transportation. Include gas, maintenance, bus or train fare. 12. Do not include car payments. \$0.00 13. Entertainment, clubs, recreation, newspapers, magazines, and books Charitable contributions and religious donations 14. \$200.00 14. 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. \$0.00 15a. 15a Life insurance \$0.00 15b. Health insurance 15b. \$150.00 15c. Vehicle insurance 15c. \$0.00 15d. 15d. Other insurance. Specify: 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. \$0.00 16 17. Installment or lease payments: \$0.00 17a. 17a. Car payments for Vehicle 1 \$0.00 17b. Car payments for Vehicle 2 17b \$0.00 17c. 17c. Other. Specify:\_ \$0.00 17d. Other. Specify: 17d. 18. Your payments of alimony, maintenance, and support that you did not report as deducted \$0.00 from your pay on line 5, Schedule I, Your Income (Official Form 106I). 18. 19. Other payments you make to support others who do not live with you. \$0.00 19. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20a. \$ 0.00 20b. \$ 0.00 20b. Real estate taxes \$ 0.00 20c. Property, homeowner's, or renter's insurance 20c.

Official Form 106J Record # 791978 Schedule J: Your Expenses Page 2 of 3 Case 18-25457 Doc 1 Filed 09/10/18 Entered 09/10/18 17:22:19 Desc Main Document Page 31 of 59

| Debtor | 1 KIIOI      | пенец  | JOHNSON                               | Case Number (if known) |               |                                       |
|--------|--------------|--|---------------------------------------|------------------------|---------------|---------------------------------------|
|        | First Na     | me Middle Name   | Last Name                             |                        |               |                                       |
| 21.    | Other. S     | Specify:   |                                       | -                      | 21.           | \$0.00                                |
| 22     | Your mo      | nthly expense: Add lines 4 through 21.   |                                       |                        | 22.           | \$3,278.00                            |
|        | The resu     | It is your monthly expenses.   |                                       |                        |               | ·                                     |
|        |              |  |                                       |                        |               |                                       |
|        |              |  |                                       |                        |               |                                       |
| 23.    | Calculat     | e your monthly net income.   |                                       |                        |               |                                       |
|        | 23a.         | Copy line 12 (your comibined monthly in  | ncome) from Schedule I.               |                        | 23a.          | \$4,728.70                            |
|        | 23b.         | Copy your monthly expenses from line 2   | 22 above.                             |                        | 23b. <b>-</b> | \$3,278.00                            |
|        | 23c.         | Subtract your monthly expenses from your   | our monthly income.                   |                        | 23c.          | \$1,450.70                            |
|        |              | The result is your monthly net income.   |                                       |                        | <u> </u>      | · · · · · · · · · · · · · · · · · · · |
|        |              |  |                                       |                        |               |                                       |
|        |              |  |                                       |                        |               |                                       |
|        |              |  |                                       |                        |               |                                       |
|        |              |  |                                       |                        |               |                                       |
|        | _            |  |                                       |                        |               |                                       |
| 24.    | -            | expect an increase or decrease in your ex  | •                                     |                        |               |                                       |
|        |              | nple, do you expect to finish paying for you<br>e payment to increase or decrease becaus |                                       | • •                    |               |                                       |
|        | X No         | e payment to increase or decrease becaus   | e of a modification to the terms of y | our mortgage:          |               |                                       |
|        | $\mathbf{H}$ |  |                                       |                        |               |                                       |
|        | Yes          | Explain Here:  |                                       |                        |               |                                       |
|        |              |  |                                       |                        |               |                                       |
|        |              |  |                                       |                        |               |                                       |
|        |              |  |                                       |                        |               |                                       |
|        |              |  |                                       |                        |               |                                       |

 Official Form 106J
 Record #
 791978
 Schedule J: Your Expenses
 Page 3 of 3

| Fill in this in           |            |                                  |                   |
|---------------------------|------------|----------------------------------|-------------------|
| Debtor 1                  | Rhonda     | Herlett                          | Johnson           |
|                           | First Name | Middle Name                      | Last Name         |
| Debtor 2                  |            |                                  |                   |
| (Spouse, if filing)       | First Name | Middle Name                      | Last Name         |
|                           |            | he : <u>NORTHERN</u> District of | _ <u>ILLINOIS</u> |
| Case Number<br>(If known) |            |                                  | _                 |

## Official Form 106 Dec

#### **Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| Sign Below   |   |
|--|---|
| Did you pay or agree to pay someone who is NOT a     | n attorney to help you fill out bankruptcy forms?   |
| No   |   |
| Yes. Name of Person                                  | Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |
|  |   |
|  |   |
| Under populty of position I declare that I have read | he cummers and caledules filed with this declaration and that they are true and               |
| correct.   | he summary and schedules filed with this declaration and that they are true and               |
| ★ /s/ Rhonda Herlett Johnson                         | <b>x</b>  |
| Signature of Debtor 1                                | Signature of Debtor 2   |
| Date 09/05/2018                                      | Date  |
| MM / DD / YYYY                                       | MM / DD / YYYY  |
|  |   |

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|                     |                     |                                       |                  | 0.000 |
|---------------------|---------------------|---------------------------------------|------------------|-------|
| Fill in this in     | nformation to ider  | itify your case:                      |                  |       |
|                     |                     |                                       |                  |       |
| Debtor 1            | Rhonda              | Herlett                               | Johnson          |       |
|                     | First Name          | Middle Name                           | Last Name        | _     |
| Debtor 2            |                     |                                       |                  |       |
| (Spouse, if filing) | First Name          | Middle Name                           | Last Name        |       |
|                     |                     |                                       |                  |       |
| United States       | Bankruptcy Court fo | r the : <u>NORTHERN</u> District of _ | ILLINOIS (State) |       |
| Case Number         | r                   |                                       |                  |       |
| (If known)          |                     |                                       |                  |       |
|                     |                     |                                       |                  |       |

# Official Form 107

#### Statement of Financial Affairs for Individuals Filing for Bankruptcy

04/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| 14111501  |  |                              |                                       |                            |  |  |  |
|---|--|------------------------------|---------------------------------------|----------------------------|--|--|--|
| Part '  | Give Details About Your Marital Status and W           | here You Lived Before        |                                       |                            |  |  |  |
| 01. What is your current marital status?  |  |                              |                                       |                            |  |  |  |
| _   |  |                              |                                       |                            |  |  |  |
| L   | Married  |                              |                                       |                            |  |  |  |
|   | Not married  |                              |                                       |                            |  |  |  |
|   |  |                              |                                       |                            |  |  |  |
|   | ring the last 3 years, have you lived anywhere ot      | her than where you live no   | w?                                    |                            |  |  |  |
| _   | No.  |                              |                                       |                            |  |  |  |
|   | Yes. List all of the places you lived in the last 3 ye | ars. Do not include where y  | ou live now.                          |                            |  |  |  |
|   |  |                              |                                       |                            |  |  |  |
|   | Debtor 1   | Dates Debtor 1 lived there   | Debtor 2:                             | Dates Debtor 2 lived there |  |  |  |
|   |  |                              | Same as Debtor 1                      | Same as Debtor 1           |  |  |  |
|   | 14630 Spaulding AVe.                                   | From 2008 -                  |                                       | Carrie as Desici 1         |  |  |  |
|   | Harvey, IL 60426                                       | To 01/2017                   |                                       | <del></del>                |  |  |  |
|   |  | .0020                        |                                       |                            |  |  |  |
|   |  |                              |                                       |                            |  |  |  |
|   |  |                              |                                       |                            |  |  |  |
| 03 Wit  | hin the last 8 years, did you ever live with a spo     | use or legal equivalent in a | community property state or territory | ? (Community               |  |  |  |
|   | perty states and territories include Arizona, Cali     | fornia, Idaho, Louisiana, N  | evada, New Mexico, Puerto Rico, Texas | s, Washington,             |  |  |  |
| _   | l Wisconsin.)  |                              |                                       |                            |  |  |  |
| ■ No.  ☐ Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H). |  |                              |                                       |                            |  |  |  |
| Tes. Iviake sure you fill out scriedule in. Your codebtors (Official Politi 1001).    |  |                              |                                       |                            |  |  |  |
|   |  |                              |                                       |                            |  |  |  |
| Part :  | Explain the Sources of Your Income                     |                              |                                       |                            |  |  |  |
|   |  |                              |                                       |                            |  |  |  |
|   |  |                              |                                       |                            |  |  |  |
|   |  |                              |                                       |                            |  |  |  |
|   |  |                              |                                       |                            |  |  |  |
|   |  |                              |                                       |                            |  |  |  |
|   |  |                              |                                       |                            |  |  |  |
|   |  |                              |                                       |                            |  |  |  |
|   |  |                              |                                       |                            |  |  |  |
|   |  |                              |                                       |                            |  |  |  |
|   |  |                              |                                       |                            |  |  |  |
|   |  |                              |                                       |                            |  |  |  |

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Debtor 1 Rhonda Herlett Johnson Case Number (if known) First Name Middle Name Last Name 04 Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. ☐ No. Yes. Fill in the details Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income **Gross income** Check all that apply (before deductions and Check all that apply (before deductions and exclusions) exclusions) Wages, commissions, Wages, commissions, \$65,920 From January 1 of current year until bonuses, tips bonuses, tips the date you filed for bankruptcy: Operating a business Operating a business Wages, commissions, Wages, commissions, \$75,516 For last calendar year: bonuses, tips bonuses, tips (January 1 to December 31, 2017) Operating a business Operating a business Wages, commissions, \$75,572 Wages, commissions, For the calendar year before that: bonuses, tips bonuses, tips (January 1 to December 31, 2016) Operating a business Operating a business 05 Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. Yes. Fill in the details Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income **Gross income** Describe below. (before deductions and Describe below. (before deductions and exclusions) exclusions) Part 3: List Certain Payments You Made Before You Filed for Bankruptcy

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Rhonda Herlett Johnson Case Number (if known) \_ Debtor 1 First Name Middle Name Last Name Are either Debtor 1's or Debtor 2's debts primarily consumer debts? No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425\* or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$6,425\* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. \* Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Dates of Total amount paid Amount you still owe Was this payment for... payments Carrington Mortgage SE 1600 S \$97,226 Monthly \$3.744 Mortgage Car Douglass Rd Ste 2 Anaheim CA Credit card 92806 Loan repayment Suppliers or vendors Other Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. Yes. List all payments to an insider. Dates of **Total amount** Amount you still Reason for this payment payment paid 08 Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. No. Yes. List all payments to an insider. Dates of **Total amount** Amount you still Reason for this payment Include creditor's name payment Part 4: Identify Legal actions, Repossessions, and Foreclosures

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| Debi | First Name  | Middle Name  | Last Name  | Case Number (II  | Known)              |                             |  |  |
|------|---|--|--|--|---------------------|-----------------------------|--|--|
| 09   | List all such matters, inclu  | ding personal injury cas   |  | t action, or administrative proceedi<br>s, collection suits, paternity actions |                     | ody                         |  |  |
|      | modifications, and contract   | ct disputes.   |  |  |                     |                             |  |  |
|      | No.   |  |  |  |                     |                             |  |  |
|      | Yes. Fill in the details.   |  | Nature of the case   | Court or agency  | Ot                  |                             |  |  |
|      | Us Bk Na VS Rhond   | a Johnson  | Chancery   | Cook County- Chancery Di   | vision              | Status of the case  Pending |  |  |
|      | 18CH978   | <del>a comicon</del>   | Chancery   | Cook Sounty Chancery Br  | VIOIOII             | On appeal                   |  |  |
|      |   |  |  |  |                     | Concluded                   |  |  |
|      |   |  |  |  |                     |                             |  |  |
|      |   |  |  |  |                     |                             |  |  |
| 10   | Within 1 year before you f<br>Check all that apply and fi   |  | any of your property repossesse  | ed, foreclosed, garnished, attached  | , seized, or levied | !?                          |  |  |
|      | ☐ No. Go to line 11   |  |  |  |                     |                             |  |  |
|      | Yes. Fill in the information  | ation below.   |  |  |                     |                             |  |  |
|      | _   |  |  |  |                     |                             |  |  |
|      |   |  | Describe the property  |  | Date                | Value of the property       |  |  |
|      |   |  | 14630 Spaulding Ave.   |  | 07/27/2018          | \$55,000                    |  |  |
|      |   |  | Harvey, IL 60426   |  |                     |                             |  |  |
|      |   |  |  |  |                     |                             |  |  |
|      |   |  | Explain what happened  |  |                     |                             |  |  |
|      |   |  | Property was reposses  |  |                     |                             |  |  |
|      |   |  | Property was foreclose   |  |                     |                             |  |  |
|      |   |  | Property was garnished Property was attached,  |  |                     |                             |  |  |
|      |   |  | i Toperty was attached,  | , seized, of levied.   |                     |                             |  |  |
|      |   |  |  |  |                     |                             |  |  |
| 11   | Within 90 days before yo  | u filed for bankruptcy,  | did any creditor, including a ba   | nk or financial institution, set off   | any amounts fro     | m your accounts             |  |  |
|      | or refuse to make a payn  | nent because you owed  | d a debt?  |  |                     |                             |  |  |
|      | No. Go to line 11   |  |  |  |                     |                             |  |  |
|      | Yes. Fill in the informa  |  |  |  |                     |                             |  |  |
| 12   | Within 1 year before you<br>court-appointed receiver,   |  | was any of your property in the possession of an assignee for the benefit of creditors, a<br>her official? |  |                     |                             |  |  |
|      | No.   |  |  |  |                     |                             |  |  |
|      | Yes.  |  |  |  |                     |                             |  |  |
| F    | art 5: List Certain Gifts   | and Contributions  |  |  |                     |                             |  |  |
| 13   | Within 2 years before you   | u filed for bankruptcy,  | did you give any gifts with a tota   | al value of more than \$600 per pe   | rson?               |                             |  |  |
|      | No.   |  |  |  |                     |                             |  |  |
|      | Yes. Fill in the details  | for each gift.   |  |  |                     |                             |  |  |
| 14   | Within 2 years before you   | <br>I/ithin 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? |  |  |                     |                             |  |  |
|      | No.   |  |  |  |                     |                             |  |  |
|      | Yes. Fill in the details  | for each gift.   |  |  |                     |                             |  |  |
|      | List Cortain Loss   |  |  |  |                     |                             |  |  |
|      | art 6: List Certain Loss  | es   |  |  |                     |                             |  |  |
| 15   | Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? |  |  |  |                     |                             |  |  |
|      | No.   |  |  |  |                     |                             |  |  |
|      | Yes. Fill in the details  | for each gift.   |  |  |                     |                             |  |  |
|      |   |  |  |  |                     |                             |  |  |
|      |   |  |  |  |                     |                             |  |  |

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|--------|---|----------------------|---|--|------------------------------------|--|
| Debtor | 1         Rhonda         Herlett           First Name         Middle Name   |                      | Johnson<br>Last Name                              |  | own)                               |  |
|        | riist vaille wildule vaille   |                      | Last Name   |  |                                    |  |
| Pa     | List Certain Payments or Transfers  |                      |   |  |                                    |  |
|        | Within 1 year before you filed for bankrup consulted about seeking bankruptcy or p Include any attorneys, bankruptcy petitio  No.  Yes. Fill in the details                           | reparing a           | a bankruptcy petition?                            |  |                                    | ou   |
|        | Party Contact Info  |                      | Description and value                             | e of any property transferred              | Date payment or transfer           | Amount of payment  |
|        | Geraci Law L.L.C.  55 E. Monroe Street #3400  Chicago,IL 60603  |                      |   |  | From<br>08/29/2018 -<br>09/05/2018 | Payment/Value:<br>\$4,000.00: \$0.00<br>paid prior to filing,<br>balance to be paid<br>through the plan. |
|        | Party Contact Info  |                      | Description and value                             | e of any property transferred              | Date payment or transfer           | Amount of payment  |
|        | Hananwill Credit Counseling  115 N. Cross St.  Robinson, IL 62454   | _                    | Credit Counseling Serv                            | rices                                      | 2018                               | \$25.00  |
|        | Within 1 year before you filed for bankrup<br>promised to help you deal with your credi<br>Do not include any payment or transfer th  | tors or to           | make payments to your                             |  | perty to anyone w                  | ho   |
|        | ■ No.  Yes. Fill in the details.  |                      |   |  |                                    |  |
|        | Within 2 years before you filed for bankru<br>transferred in the ordinary course of your<br>Include both outright transfers and transf<br>Do not include gifts and transfers that you | business<br>ers made | or financial affairs?<br>as security (such as the | granting of a security interest or morto   |                                    | erty).   |
|        | ■ No.  Yes. Fill in the details for each gift.  |                      |   |  |                                    |  |
|        | Within 10 years before you filed for bankr<br>beneficiary? (These are often called asset  |                      |   | ty to a self-settled trust or similar devi | ce of which you ar                 | e a  |
|        | ■ No. □ Yes. Fill in the details for each gift.   |                      |   |  |                                    |  |

Part 8:

List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units

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Rhonda Herlett Johnson Case Number (if known) Debtor 1 First Name Middle Name Last Name Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. ☐ No Yes. Fill in the details. Last 4 digits of account number Type of account or Date account was Last balance before closed, sold, moved, instrument closing or transfer or transferred Checking 06/2018 First Citizens Bank XXX - Unknown \$1.000 transferred into Savings savings with TCF Money market Bank scheduled Brokerage on B. Other Checking First Citizens Bank XXX - Unknown 06/2018 \$200, transferred Savings into savings with TCF Bank Money market scheduled on B. Brokerage Other Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? No Yes. Fill in the details. Who else had access to it? Describe the contents Do you still have it? 22 Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? Yes. Fill in the details. Who else has or had access to it? Describe the contents Do you still have it? **Identify Property You Hold or Control for Someone Else** Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. Yes. Fill in the details. Where is the property? Value Describe the property Give Details About Environmental Information For the purpose of Part 10, the following definitions apply: Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

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| Debtor 1         | Rhonda                      | Herlett  | Johnson                           | Case Number (if known)   |                        |
|------------------|-----------------------------|--|-----------------------------------|--|------------------------|
|                  | First Name                  | Middle Name  | Last Name                         |  |                        |
| 24 <b>Ha</b>     | s any governmental u        | init notified you that you                             | may be liable or potentially liab | ole under or in violation of an environmental  | law?                   |
| _                |                             | init notinou you that you                              | may be hable of peternany has     |  |                        |
|                  | No.                         |  |                                   |  |                        |
|                  | Yes. Fill in the details    |  |                                   |  |                        |
|                  |                             | Gove   | ernmental unit                    | Environmental law, if you know it  | Date of notice         |
| 25 Ha            | matified and a              | average and all comits of any or                       | alaasa of hawardaya waterial?     |  |                        |
| 2√ па            | ve you notified any go      | overnmental unit of any r                              | elease of hazardous material?     |  |                        |
|                  | No.                         |  |                                   |  |                        |
|                  | Yes. Fill in the details    |  |                                   |  |                        |
|                  |                             | Gove   | ernmental unit                    | Environmental law, if you know it  | Date of notice         |
| 00               |                             |  |                                   |  |                        |
| <sup>26</sup> Ha | ve you been a party ir      | any judicial or administ                               | rative proceeding under any er    | nvironmental law? Include settlements and o  | orders.                |
|                  | No.                         |  |                                   |  |                        |
|                  | Yes. Fill in the details    |  |                                   |  |                        |
|                  |                             | Cour   | rt or agency                      | Nature of the case   | Status of the case     |
|                  |                             |  |                                   |  |                        |
| Part 1           | Give Details Abou           | ut Your Business or Conne                              | ctions to Any Business            |  |                        |
| 27 <b>w</b> i    | thin 4 years hefore yo      | u filed for hankruntey di                              | d you own a husiness or have      | any of the following connections to any bus  | iness?                 |
| ***              | _                           |  | de, profession, or other activity |  | illess:                |
|                  | = ' '                       |  |                                   | •  |                        |
|                  | =                           |  | LC) or limited liability partners | inip (LLP)   |                        |
|                  | ∐ A partner in a par        | -  |                                   |  |                        |
|                  | An officer, directe         | or, or managing executive                              | e of a corporation                |  |                        |
|                  | An owner of at le           | ast 5% of the voting or ed                             | quity securities of a corporation | n  |                        |
|                  | No. None of the above       | e applies. Go to Part 12.                              |                                   |  |                        |
| _                | •                           | * *  | etails below for each business.   |  |                        |
| Ц                | res. Check all that ap      | opiy above and illi ili the de                         | stalls below for each business.   |  |                        |
|                  | No.                         | r other parties.                                       | d you give a financial statemer   | nt to anyone about your business? Include a  | ıll financial          |
| Ц                | Yes. Fill in the details    |  |                                   |  |                        |
|                  |                             | Date i   | issued                            |  |                        |
| Part 1           | Sign Below                  |  |                                   |  |                        |
| ansv<br>in co    | wers are true and corr      | ect. I understand that ma<br>ruptcy case can result in | aking a false statement, concea   | its, and I declare under penalty of perjury the<br>ling property, or obtaining money or proper<br>conment for up to 20 years, or both. |                        |
| x                | /s/ Rhonda Herlett          | Johnson  | ×                                 |  |                        |
| •                | Signature of Debtor 1       |  | Signature                         | of Debtor 2  |                        |
|                  |                             |  |                                   |  |                        |
|                  | Date 09/05/2018             |  | Date                              |  |                        |
|                  | Date 09/05/2018 MM / DD / Y | YYY  | MM                                | I / DD / YYYY  |                        |
|                  |                             |  |                                   |  |                        |
| Did              | you attach additional       | pages to Your Statement                                | of Financial Affairs for Individ  | luals Filing for Bankruptcy (Official Form 10  | 7)?                    |
|                  | No                          |  |                                   |  |                        |
|                  | Yes                         |  |                                   |  |                        |
| _                |                             | ay someone who is not a                                | n attorney to help you fill out b | ankruptcy forms?   |                        |
| _                |                             |  | - · ·                             | -  |                        |
| _                | No                          |  |                                   |  |                        |
|                  | Yes. Name of person         |  |                                   | Attach the Bankruptcy Petition Prepare   |                        |
|                  |                             |  |                                   | Declaration, and Signature   | e (Official Form 179). |

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B2030 (Form 2030) (12/15)

# United States Bankruptcy Court NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION

| In | re  |                        |                        |                       |                    |  |                      |                        |         |
|----|---|------------------------|------------------------|-----------------------|--------------------|--|----------------------|------------------------|---------|
| Rh | onda  | Herlett                | Johnson                | / Debtor              |                    |  | Case No:             |                        |         |
|    |   |                        |                        |                       |                    |  | Chapter:             | Chapter 13             |         |
|    |   |                        |                        | DISCL                 | OSURE OF CO        | MPENSATION OF ATTO   | ORNEY FOR DEF        | BTOR                   |         |
|    | npens   | sation pa              | id to me               | within one year be    | fore the filing of | b), I certify that I am the at<br>the petition in bankruptcy, on<br>the petition of or in connection | or agreed to be paid | d to me, for service   | es      |
|    | For   | r legal s              | ervices, I             | have agreed to acc    | ept                | \$4,000.00   |                      |                        |         |
|    | Pric  | or to the              | filing of              | this statement I ha   | ve received        | \$0.00   |                      |                        |         |
|    | Bal   | lance Di               | ie                     |                       |                    | \$4,000.00   |                      |                        |         |
| 2. | The   | source<br>Debte        |                        | mpensation paid to    |                    |  |                      |                        |         |
| 3. | The   | source                 | of compe               | ensation to be paid   | to me is:          |  |                      |                        |         |
|    |   | Deb                    | tor(s)                 | Other: (sp            | pecify)            |  |                      |                        |         |
| 4. |   |                        | not agree<br>law firm. |                       | ve-disclosed comp  | pensation with any other pe  | rson unless they ar  | re members and ass     | ociates |
|    |   |                        | law firm.              |                       |                    | sation with a other person o with a list of the names of t   |                      |                        |         |
| 5. |   | eturn for<br>e, includ |                        | ve-disclosed fee, I h | have agreed to ren | nder legal service for all asp   | pects of the bankru  | ptcy                   |         |
|    | a.  | Analys                 |                        | debtor' s financial s | situation, and ren | dering advice to the debtor  | in determining who   | ether to file a petiti | on in   |
|    | b. Preparation and filing of any petition, schedules, statements of affairs and plan which may be required; |                        |                        |                       |                    |  |                      |                        |         |
|    | c.  | Repres                 | entation               | of the debtor at the  | meeting of credi   | tors and confirmation heari  | ng, and any adjour   | ned hearings thereo    | of;     |
| 6. | Вуа   | agreeme                | ent with th            | ne debtor(s), the ab  | ove-disclosed fee  | does not include the follow  | ving service:        |                        |         |
|    |   | Γ                      |                        |                       | (                  | CERTIFICATION  |                      |                        |         |
|    |   |                        |                        |                       | ing is a complete  | statement of any agreement or(s) in this bankruptcy pro  |                      | or                     |         |
|    |   |                        | Date:                  | 09/10/2018            |                    | /s/ Cecil Denard Scruggs   |                      |                        |         |
|    |   |                        | Date                   |                       |                    | Signature of Attorney  |                      |                        |         |

791978 Page 1 of 1 Record #

Geraci Law L.L.C. Name of law firm

### Case 18-25457 Doc 1 Filed 09/10/18 Entered 09/10/18 17:22:19 Desc Main

### UNITED STATESTANKERSPITCHSCOURT NORTHERN DISTRICT OF ILLINOIS

## RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Use for cases filed on or after September 19, 2016)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtors and the attorney that conflicts with this agreement is void.

#### A. BEFORE THE CASE IS FILED

#### THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

#### THE ATTORNEY AGREES TO

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule, and explain how and when the attorney's fees and the trustee's fees are determined and paid.



- Case 18-25457 Doc 1 Filed 09/10/18 Entered 09/10/18 17:22:19 Desc Main 3. Personally review with the debtor and under the compared polition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.
- 6. Advise the debtor of the need to maintain appropriate insurance.

#### B. AFTER THE CASE IS FILED

#### THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly, or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and when the case is called for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce.)
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property, and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

#### THE ATTORNEY AGREES TO

1. Advise the debtor of the requirement to attend the meeting of creditors, and notify the debtor of the date, time, and place of the meeting.



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- Case 18-25457 Doc 1 Filed 09/10/18 Entered 09/10/18 17:22:19 Desc Mair 2. Inform the debtor that the debtor flow punctual and, 43th 58se of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.
- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default, or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Prepare, file, and serve a notice of conversion to Chapter 7, pursuant to § 1307 (a) of the Bankruptcy Code and Local Bankruptcy Rule 1017-1.
- 17. Provide any other legal services necessary for the administration of the case.



PFG Rec# 791-978

# Case 18-25457 Doc 1 Filed 09/10/18 Entered 09/10/18 17:22:19 Desc Main C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3. If the case is converted to a case under chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the chapter 7 case for any unpaid fees and expenses, pursuant to section 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

### D. RETAINERS AND PREVIOUS PAYMENTS

1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.



The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:

- (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows: purpose: provide some money for attorney without waiting 6 months. Advantage to debtor: costs client less by reducing administrative expense and encouraging efficiency rather than charging by hour and submitting bills.
- (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
- (c) The retainer is a flat fee for the services to be rendered during the chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;



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- (d) Any portion of the retainer that support and Page quired for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing.

### E. CONDUCT AND DISCHARGE

- 1. Improper conduct by the attorney. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. Improper conduct by the debtor. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.

[Remaining page intentionally left blank]



# Case 18-25457 Doc 1 Filed 09/10/18 Entered 09/10/18 17:22:19 Desc Main F. ALLOWANCE AND PAYMENT OF ATTORISES

1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$ 4.000.00

| 2. In addition, the debtor will pay the filing fee in the case and other expenses of \$310.00   |
|---|
| 3. Before signing this agreement, the attorney has received ,\$   |
| toward the flat fee, leaving a balance due of \$  |
| leaving a balance due of \$   |
| 4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object. |
| Date: 8,29 (8)  |
| Signed:   |
| Rhonda Johnson  |
| 00/1  |

Attorney for the Debtor(s)

Do not sign this agreement if the amounts are blank.

Co-Debtor(s)

Case 18-25457

Representing Geraci Law L.L.C.

7 Doc 1 File**6 09 £0 43W** National Headquarters: ነኝት ፫ Mpnroe § W Entered 09/10/18 17:22:19 roe Street #3490 Chieggo, IL 60603 www.infotapes.com

Desc Main

Date: 8/29/2018

Consultation Attorney: CDS

Record #: 791-978

|  | Attauray Datainay Aggament Chapter 12  |
|--|--|
|  | Attorney Retainer Agreement Chapter 13   |
| The undersigned hires Gera                         | ci Law L.L.C. for representation in a Chapter 13 bankruptcy. I have signed and received a copy of any  |
| "Court Approved Retention Agreement" (CAR)         | A) or "Rights and Responsibilities" (RR) between Chapter 13 Debtors and their Attorneys" Any terms that  |
| conflict with it are null and void. I agree to co  | mply with those terms. Attorney fees for filed Chapter 13 Bankruptcy shall be \$ or the fee stated in  |
| the CARA or RR if applicable. I have been a        | dvised of my Chapter 7 alternative and choose to file Chapter 13 instead even though it usually costs more.  |
| More than 1 attorney or paralegal will work on     | my case. I will use CLIENT CORNER and read all material on it and the Geraci Law Website.  |
| x FEES: In addition to Attorne                     | y fees you agree to pay any court costs, educational course costs, \$25 for postage; \$15 for copies; PACER  |
| charges up to \$5.00 where a motion to extend      | or impose stay is necessary and prior case was not with us; actual costs of certified mail. Any amount not paid  |
| by me prior to the case being filed shall be pai   | d ahead of creditors through the Chapter 13 Trustee. The CARA fee is a flat fee, but my attorneys may apply to   |
| the court for additional fees based on the followi | ng hourly rates: Attorney-\$275/hr; Senior Attorney-\$375/hr; Supervising Attorney-\$450/hr; Paralegal-\$85/hr; Senior   |
| Paralegal-\$150/hr. if allowed by the CARA or co   | urt order, such as excessive work, motions, evidentiary hearings, adversary proceedings or appeals. Fees are   |
| "flat fees" and "advance payment retainers" fo     | r pre-filing and pre-confirmation work, become property of this firm on payment, and are deposited into the  |
| firm's operating account. I can choose to pay      | on an hourly basis, but flat fee usually results in me paying less. Payments are applied to the "flat fee". If this  |
| contract is terminated by either party prior to t  | ne filing of the case, we will refund unearned fees. If I close my file, my case is dismissed or breach this contract  |
| I agree to pay for the work done. In Wisconsin     | I can submit fee disputes to binding arbitration within 30 days with the Wisconsin Lawyers fund for Client   |
| Protection(c/o State Bar of Wisconsin, P.O. Bo     | x 7158, Madison, WI 53707-7158) I assign to my attorney all amounts tendered as filing fees or court costs and   |
|  | om his trust account to his operating account in payment of all outstanding fees owed by me if case is not filed.  |
| x Attorney fees and costs g                        | et paid before my creditors before mortgage arrears, and vehicles scheduled to be paid in the plan, start  |
| getting paid. Vehicles may be scheduled to g       | et a small payment to cover depreciatiion each month, like \$15-100, until attorney fees are paid, then the vehicle  |
| gets larger payments, so the vehicle is paid in    | about the same time as it would be if the attorney fees were not first. RESULT: if I fail to complete the plan, I  |
| may end up paying my attorney but not as mu        | ch on my vehicle and mortgage arrears and other creditors, so I will to do my best to complete the plan.   |
| x Injury or other claims or pro                    | pperty I now have or acquire after filing Chapter 13, I must disclose to Geraci law and the Chapter 13 trustee   |
| and to the Bankruptcy Court and my creditors       | in a filed amendment and obtain authority to keep them or pay those claims to the Trustee.   |
| x PLAN: My estimated payi                          | in a filed amenament and obtain authority to keep them or pay those claims to the Trustee.  ment is \$1 per month for months based on the information I have provided, including income, the part of the plan term. The Court Chapter 13 Trustee or creditors.   |
| expenses, assets and depts. The payment of         | length may need to be increased for alkor part of the planterm. The Court, Chapter 13 Trustee of creditors   |
| could object to my proposed Chapter 13 payn        | ment, which may cause it to increase. I agree to read my petition and plan and study it before signing it so I   |
| know what is included, INCLUDING what d            | ebts, assets property and exemptions I am claiming, and to make full disclosure to every question  |
| x Karaman TAX REFUNDS or other                     | income during plan: I will send my IRS and state tax returns to my attorney or the Trustee each year. I will turn  |
| over refunds, additional-income or assets to       | he Trustee unless I am already paying my creditors 100%. If my income or expenses change, my plan payment  |
| may have to change. If I am eligible to receive    | a tax refund during my Chapter 13, I may have to send it to the Chapter 13 Trustee unless I am specifically  |
| advised that I do not need to. If I receive any    | significant sums of money other than through employment, including but not limited to life insurance proceeds,   |
| workers compensation award, personal injury        | or other court settlement, I MUST notify my attorney immediately and I may have to pay some or all of the funds  |
|  | get INJURED or get A CLAIM after filing I WILL DISCLOSE IT BY AMENDING MY CASE   |
| x Plan payment includes                            | all debts I list, unless plan states otherwise: I may be paying some creditors directly. My plan payment does  |
| NOT include include future mortgage, rent, or      | ondo fees and support payments; criminal fines/court fees; rent/lease arrears; student loan principal and interest   |
|  | sold property taxes; debts incurred after the case is filed, including any taxes or HOA fees as long as the  |
| property is in my name; other                      | TO CONTINUE I CONTINUE |
| x _ K _ Student loans: are usua                    | ly NEVER paid 100% in a Chapter 13, so my student loans will CONTINUE to accrue interest, and if I don't pay   |
|  | nd of the plan, so I have been told about this and I will deal with my student loans myself directly   |
| x Debts not discharged if                          | not paid in full: student loans; educational debts; tax debt interest; unfiled or late filed tax debts; undisclosed  |
|  | rred by fraud, or debts listed in your red folder or found non-dischargeable by a Judge.   |
| X Our Representation is I                          | imited to Bankruptcy Court until Discharge or case closing of this bankruptcy. We do not represent you in  |
| state court, or in loan modifications, short sal   | es, etc. Any delay in filing could result in judgments or liens we can't eliminate in bankrupcy. When this case is   |
| closed by the Clerk or you receive a discharge     | e, whichever is first, our representation of you ends.   |
| X Changes after this:   ca                         | nnot transfer any property or incur any credit or debt without the express permission of my attorney or the Court  |
| and I must make full disclosure of all income,     | expenses, debts and assets in my initial consultation and on my bankruptcy petition.   |
| x No Discharge If I fail to re                     | main current in a domestic support obligation (DSO), or fail to certify to the Court that I have remained current in   |
| DSO or Mortgage payments, or it I tail to take     | my financial management class. I have received the 11 U.S.C § 527(a) disclosures on a separate sheet.  |
| x Khanda ( hotama)                                 | $\checkmark$ x   |
| Rhonda Johnson (Debtor)                            | (Joint Debtor)   |

rev 171129

Rhonda Johnson (Debtor)

# Case 18-2545 ERACO LAWFILED LA

FEE PRIORITY CHAPTER 13 DISCLOSURE: This disclosure explains the payment structure in your Chapter 13 and its effects. It is a supplement to your signed Court Approved Retention Agreement, and does not change any of its terms.

ATTORNEY FEES PAID THROUGH CHAPTER 13: Before filing your Chapter 13, you paid \$ 0.00 toward our attorneys' fees for the bankruptcy. We agreed with you that the remaining balance on attorneys' fees of \$ 4,000.00, plus any costs advanced or billed, will be paid to us over time through your Trustee payments if the Court approves our Application. Pre-confirmation payments to Geraci Law LLC are held by the Trustee and disbursed to Geraci Law LLC upon confirmation or dismissal (whichever is earlier).

ORDER OF PAYMENTS: Unless treated otherwise in your Plan, creditor's claims will be paid by the Trustee pro rata in the following order: (1) post-filling mortgage payments (if being paid in the Chapter 13); (2) monthly payments on non-mortgage secured claims (such as secured car loans); (3) costs of administration (such as our remaining attorneys' fees balance above); (4) mortgage arrears; (5) priority unsecured claims other than costs of administration; (6) special class of unsecured claims; and (7) other unsecured claims. Your Chapter 13 does NOT propose to alter this order of payments.

RATE OF PAYMENT IN YOUR PLAN: Your Chapter 13 plan proposes to pay \$ 1,450.00 per month for at least 60 months. This amount may change depending on various factors such objections or claims filed. The Trustee will deduct an estimated 4-9% fee on each payment you make. Under the above priority order and subject to court approval or subsequent amendments, the Trustee will pay, pursuant to confirmed plan terms, the following estimated amounts out of your monthly payment:

The Trustee will first deduct \$ 73.95 /month in fees, then the Trustee will pay creditors and attorney fees as follows:

- 1. Before Confirmation: \$1,376.05/month to Geraci Law L.L.C.
- 2. After Confirmation: \$1,376.05/month to Geraci Law L.L.C.
- 3. After our fees are paid off, the Trustee pays other allowed unsecured claims pro rata from funds available until plan payments are complete.

EFFECT ON YOUR CREDITORS DUE TO PRIORITY OF PAYMENTS: Our attorneys' fees get paid before certain creditors as outlined above. If your Chapter 13 case is dismissed or converted to a Chapter 7 (if eligible), or you do not receive a discharge for any other reason, the balances owed to creditors could be larger (due to interest) or not as low as they would've been had you paid the creditors directly instead of paying the Trustee.

EFFECT ON YOU DUE TO PRIORITY OF PAYMENTS: If your Chapter 13 case is dismissed or converted to a Chapter 7 (if eligible), or you do not receive a discharge for any other reason, this means that it may be more difficult or impossible to afford to catch up on unsecured loans (such as parking tickets which could lead to being on the boot list or cause drivers' license suspension). Examples of reasons for dismissal include but are not limited to: failure to make the required Trustee payment, failure to turn over tax refunds if required, etc.

| UNDERSTOOD & ACCEPTED BY SIGNATURE BELOW:   |       |       |             |
|---|-------|-------|-------------|
| Rhorida Johnson Date:   | 9-10  | Date: | <del></del> |
| Cecil Scruggs, Attorney for Geraci Law L.L.C. Chapter 13 Attorney Fee Priority Disclosure | Date: |       | 791         |

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# UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION

In re

Rhonda Herlett Johnson / Debtor

Judge:

#### **VERIFICATION OF CREDITOR MATRIX**

The above named Debtor(s) hereby verify that the attached list of creditors is true and correct to the best of our knowledge.

I DECLARE UNDER PENALTY OF PERJURY THAT THE FOREGOING IS TRUE AND CORRECT.

Dated: 09/05/2018 /s/ Rhonda Herlett Johnson

**Rhonda Herlett Johnson** 

X Date & Sign

Record # 791978 B 1D (Official Form 1, Exh.D)(12/08) Page 1 of 1

<sup>\*</sup> Joint debtors must provide information for both spouses. Penalty for making a false statement or concealing property: Fine up to \$500,000 or up to 5 years imprisonment or both. 18 U.S.C. 152 and 3571.

B 201A (Form 201A) (11/11)

### UNITED STATES BANKRUPTCY COURT

# NOTICE TO CONSUMER DEBTOR(S) UNDER §342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a **joint case** (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly- addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

#### 1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days <u>before</u> the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

#### 2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

#### Chapter 7: Liquidation (\$245 filing fee, \$75 administrative fee, \$15 trustee surcharge: Total fee \$335

Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, the United States trustee (or bankruptcy administrator), the trustee, or creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are

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found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

#### Chapter 13: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$75 administrative fee: Total fee \$310)

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

#### Chapter 11: Reorganization (\$1,167 filing fee, \$550 administrative fee: Total fee \$1,717)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

#### Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$75 administrative fee: Total fee \$275)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

#### 3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

WARNING: Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The

| Dated: 09/05/2018 | /s/ Rhonda Herlett Johnson     |   |
|-------------------|--------------------------------|---|
|                   | Rhonda Herlett Johnson         | - |
| Dated: 09/10/2018 | /s/ Cecil Denard Scruggs       |   |
|                   | Attorney: Cecil Denard Scruggs | - |

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| tor 1  | Rhonda   | Herlett Johnson   | Case Number (if ki   | 10W/1)  |  |  |  |
|--|--|---|--|---|--|--|--|
|  | First Name   | Middle Name Last Name   |  |   |  |  |  |
|  |  | . C. D. washing Downs   |  |   |  |  |  |
| art 6  | Answer These Questions                             |   |  |   |  |  |  |
|  | What kind of debts do                              | 16a. Are your debts primarily as "incurred by an individual p   | consumer debts? Consumer debts are defir<br>orimarily for a personal, family, or household pu                    | ned in 11 U.S.C. § 101(8)<br>urpose.*           |  |  |  |
| -  |  | No. Go to line 16b. Yes. Go to line 17.   |  |   |  |  |  |
|  |  | 16b. Are your debts primarily money for a business or inve  | business debts? Business debts are debts strength or through the operation of the business                       | that you incurred to obtain<br>s or investment. |  |  |  |
|  |  | No. Go to line 16c. Yes. Go to line 17.   |  |   |  |  |  |
|  |  | 16c. State the type of debts you o  | we that are not consumer debts or business de  | ebts.   |  |  |  |
|  |  |   |  |   |  |  |  |
|  | Are you filing under<br>Chapter 7?                 | No. I am not filing under Ch  |  | concrty is excluded and                         |  |  |  |
| ;  | Do you estimate that after                         | Yes. I am filing under Chapt administrative expense   | er 7. Do you estimate that after any exempt pr<br>ss are paid that funds will be available to distrib            | ute to unsecured creditors?                     |  |  |  |
|  | any exempt property is<br>excluded and             | □No.  |  |   |  |  |  |
|  | administrative expenses                            | ∏Yes.   |  |   |  |  |  |
|  | are paid that funds will be                        |   |  |   |  |  |  |
|  | available for distribution to unsecured creditors? |   |  |   |  |  |  |
| Marian Marian  |  | <b>1</b> .49  | <b>1,000-5,000</b>   | <b>25,001-50,000</b>                            |  |  |  |
| 8.   | How many creditors do                              | ■ 1-49<br>□ 50-99   | ☐ 5,001-10,000   | <u></u> 50,001-100,000                          |  |  |  |
|  | you estimate that you<br>owe?                      | □ 100-199   | 10,001-25,000  | ☐ More than 100,000                             |  |  |  |
|  |  | 200-999   |  |   |  |  |  |
| <b>Menter</b>  |  | □ \$0-\$50,000         □  | \$1,000,001-\$10 million   | □\$500,000,001-\$1 billion                      |  |  |  |
| 19.  | How much do you                                    | \$50,001-\$100,000  | ☐ \$10,000,001-\$50 million  | ☐\$1,000,000,001-\$10 billion                   |  |  |  |
|  | estimate your assets to be worth?                  | \$100,001-\$500,000   | ☐ \$50,000,001-\$100 million   | ☐\$10,000,000,001-\$50 billion                  |  |  |  |
|  | DC WOLLE.  | \$500,001-\$1 million   | \$100,000,001-\$500 million  | ☐More than \$50 billion                         |  |  |  |
| tat <del>makana</del>  |  | \$0-\$50,000  | ☐ \$1,000,001-\$10 million   | □\$500,000,001-\$1 billion                      |  |  |  |
| 20.  | How much do you                                    | \$50,001-\$100,000  | ☐ \$10,000,001-\$50 million  | \$1,000,000,001-\$10 billion                    |  |  |  |
|  | estimate your liabilities                          | \$100,001-\$500,000   | ☐ \$50,000,001-\$100 million   | \$10,000,000,001-\$50 billion                   |  |  |  |
|  | to be?   | \$500,001-\$1 million   | \$100,000,001-\$500 million  | ☐ More than \$50 billion                        |  |  |  |
|  |  | <del></del>   |  |   |  |  |  |
| Pa   | rt 7: Sign Below                                   |   |  |   |  |  |  |
| For  | you  | correct.  | d I declare under penalty of perjury that the inf  |   |  |  |  |
|  |  | If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. |  |   |  |  |  |
| part. Helparat.morrary   |  | If no attorney represents me another this document, I have obtained   | d I did not pay or agree to pay someone who is and read the notice required by 11 U.S.C. § 34                    | not an attorney to help me fill out<br>2(b).    |  |  |  |
| er ja malematika jedem fin   |  |   | ith the chapter of title 11, United States Code,   |   |  |  |  |
| a manage of manages of the second sec |  | I understand making a false sta<br>with a bankruptcy case can res<br>18 U.S.C. §§ 152, 1341, 1519,  | tement, concealing property, or obtaining mon-<br>ult in fines up to \$250,000, or imprisonment for<br>and 3571. | up to 20 years, or both.                        |  |  |  |
| And the first substitution of the state of t |  | × Signature of Debtor 1   | Johnson × sig  | nature of Debtor 2                              |  |  |  |
| · Andrews (and parties of the partie |  | Executed on $: \frac{Q}{Q}$   | <u>5</u> /2018 Ex  | ecuted on                                       |  |  |  |
|  |  |   | DD / YYYY  | MM / DD / YYYY                                  |  |  |  |

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| In this information to identify your case:   Should State Bankruptcy Count for the:NORTHERN Durind ofLustines  | Debtor 1     | ormation to identify yo                        |   |                                |                                    |   |
|--|--------------|--|---|--------------------------------|------------------------------------|---|
| Prail Name    Mode Name   Mode Name   Mode Name   Last Point   Mode Name   Mode Name   Last Point   Prail Name   Mode Name   Mode Name   Last Point   Chack if this is an armended filing   Check if this is an armended filin |              |  | our case:   |                                |                                    |   |
| Pask Name   Mode   |              | Rhonda   | Herlett   | Johnson                        |                                    |   |
| icial Form 106 Dec  claration About an Individual Debtor's Schedules    Claration About an Individual Debtor's Schedules   Claration About an Individual Debtor's Schedules   Claration About an Individual Debtor's Schedules   12/15   |              |  |   | Last Name                      |                                    |   |
| icial Form 106 Dec  claration About an Individual Debtor's Schedules  married people are filing together, both are equally responsible for supplying correct information.  must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or ning mensy or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 s, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.    Sign Below   |              | First Name                                     | Middle Name   | Last Name                      |                                    |   |
| icial Form 106 Dec  claration About an Individual Debtor's Schedules  married people are filing together, both are equally responsible for supplying correct information.  must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or noting money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 s, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.  Sign Below  Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?  No  Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).  Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.  Signature of Debtor 2  |              |  | NORTHERN District of                                | ILLINOIS                       |                                    |   |
| in the property of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.  In amended filing specific property is grant to the property of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.  | •            |  |   | (State)                        |                                    | Check if this is an                           |
| or married people are filing together, both are equally responsible for supplying correct information.  must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or ining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 s, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.  Sign Below  Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?  No  Yes. Name of Person  Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).  Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.  Signature of Debtor 1   |              |  |   |                                |                                    | amended filing                                |
| must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or inining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 rs, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.    Sign Below   Sign Below   |              |  | n Individual I                                      | Debtor's Sched                 | ules                               | 12/15   |
| must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or ining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 s, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.    Sign Below   | o married p  | eople are filing togeth                        | er, both are equally res                            | oonsible for supplying corre   | ct information.                    |   |
| Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?  No  Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).  Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.  Signature of Debtor 1  Signature of Debtor 2   | must file th | is form whenever you<br>y or property by fraud | file bankruptcy schedu<br>I in connection with a ba | les or amended schedules. I    | Making a false statement, concea   | ling property, or<br>ment for up to 20        |
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| Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.  Signature (Official Form 119).  Signature (Official Form 119).   | _            |  |   |                                |                                    |   |
| Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.  **  **  **  **  **  **  **  **  **   | Yes. 1       | Name of Person                                 |   |                                | Attach Bankruptcy Petition         | n Preparer's Notice, Declaration, and<br>19). |
| * Elmonto Obmoor Signature of Debtor 2   |              |  |   |                                |                                    |   |
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| Signature of Depter 1  |              | alty of perjury, I declar                      | re that I have read the st                          | ummary and schedules filed     | with this declaration and that the | ey are true and                               |
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| otor 1   | Rhonda   | Herlett                                      | Johnson                                       | Case Number (if known)   |
|--|--|--|---|--|
| ALOT 1   | First Name   | Middle Name                                  | Last Name                                     |  |
| Has  | any governmental un                                | it notified you that you ma                  | ay be liable or potentially lia               | ble under or in violation of an environmental law?   |
| _  |  | -  |   |  |
| _  | No.  |  |   |  |
| Ш  | Yes. Fill in the details.                          |  | rmental unit                                  | Environmental law, if you know it Date of notice   |
|  |  | Guvais                                       | ingana dies                                   |  |
| Han  | o you potified any go                              | vernmental unit of any rele                  | ease of hazardous material                    | ?  |
| - Flav   | ve you notified any go                             |  |   |  |
|  | No.  |  |   |  |
|  | Yes. Fill in the details.                          | representative                               |   | Environmental law, if you know it Date of notice   |
|  |  | . Goven                                      | nmental unit                                  | CINVIOLITIEM CALLET AND  |
|  | . I  | any judicial or administra                   | tive proceeding under any                     | environmental law? Include settlements and orders.   |
| ∃ Har  | ve you been a party in                             | any judicial of dominiona                    |   |  |
| -  | No.  |  |   |  |
|  | Yes. Fill in the details                           |  | n anna managarah sahasarah di pengahasah mela | Nature of the case Status of the case  |
|  |  | Court  | or agency:                                    | National Communication of the  |
| _  |  | tami Müzek                                   | A A Project                                   | Proceedings Control of the State of the Stat |
| Part 1   |  | ut Your Business or Connec                   |   |  |
| 7 W  | ithin 4 years before yo                            | u filed for bankruptcy, did                  | l you own a business or hav                   | ve any of the following connections to any business?   |
|  | A sole proprietor                                  | or self-employed in a trad                   | ie, profession, or other acti                 | vity, either full-time or part-time  |
|  | □ A member of a li                                 | mited liability company (LI                  | LC) or limited liability partne               | ership (LLP)   |
|  | A partner in a pa                                  |  |   |  |
|  |  | or, or managing executive                    | of a corporation                              |  |
|  | An officer, direct                                 | or, or managing excessive                    | quity securities of a corpora                 | tion   |
|  | An owner of at le                                  | east 5% of the voling of eq                  | fairy securities of a company                 |  |
|  | No None of the sho                                 | ve applies. Go to Part 12.                   |   |  |
| -  | No. None of the abo                                | annly above and fill in the de               | etails below for each busines                 | s.   |
| L  | <del></del>  |  |   |  |
|  |  |  | id you give a financial state                 | ment to anyone about your business? Include all financial  |
| 28 V   | Vithin 2 years before y<br>nstitutions, creditors, | or other parties.                            | ,   |  |
|  |  |  |   |  |
|  | No.  |  |   |  |
| Į  | Yes. Fill in the detai                             |  | issued  |  |
|  |  |  | Markett Sections                              |  |
| Part   | 12: Sign Below                                     |  |   |  |
|  |  | this Statement of Fina                       | incial Affairs and any attach                 | ments, and I declare under penalty of perjury that the<br>neealing property, or obtaining money or property by fraud   |
| 11   | have read the answers                              | orrect, I understand that m                  | aking a false statement, co                   | ments, and rectaile under points) in person<br>necaling property, or obtaining money or property by fraud<br>norisonment for up to 20 years, or both.  |
| in   | connection with a ba                               | nkruptcy case can result i                   | n fines up to \$250,000, or in                | nprisonment for up to 20 years, or both.   |
| 11   | 8 U.S.C. §§ 152, 1341,                             | 1519, and 3571.                              |   |  |
|  |  | $\cdot \cap \cap$                            | <i>. 1</i> .                                  |  |
| 0000.0000  | MANA   | IN DUMMAN                                    | W &   |  |
| e de la companya de l | x Tryon  | m brd , a                                    | Signa   | ature of Debtor 2  |
|  | Signature of Debto                                 | or 1   | ū   |  |
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| A the angle of   | PAC  |  | Ph4-  |  |
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| ANAMAY MAINTAINAN STATES TO BE BEING THE   | Date 4 / 5<br>MM / DD                              | /2018<br>/ YYYY                              | Date  | MM / DD / YYYY   |
| and suppressionary as a research space (free probation).   | Date 4/5<br>MM / DD                                | /2018<br>/ YYYY                              |   |  |
| pochasocine, grupomanani nationali successiva di pochasocine.  | Date 4 / S<br>MM / DD                              | /2018<br>/ YYYY<br>nal pages to Your Stateme |   | MM / DD / YYYY  Individuals Filing for Bankruptcy (Official Form 187)?   |
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| NATIONS SECTIONS AND ANALYSIS. A CHARGE AND A CONTRACT TO  | No   | /2018<br>/ YYYY<br>nal pages to Your Stateme |   |  |
| e page constant total  | ■ No<br>□ Yes                                      |  | ent of Financial Affairs for h                | ndividuals Filing for Bankruptcy (Official Form 107)?  |
| e seprencial and all and   | ■ No<br>□ Yes                                      |  |   | ndividuals Filing for Bankruptcy (Official Form 107)?  |
| e de la reception de la composition della compos | No Yes Did you pay or agree                        |  | ent of Financial Affairs for h                | ndividuals Filing for Bankruptcy (Official Form 107)? I out bankruptcy forms?  |
| e seprencial and all and   | No Yes Did you pay or agree                        | to pay someone who is no                     | ent of Financial Affairs for li               | I out bankruptcy forms?  |
| e seprencial and all and   | No Yes Did you pay or agree                        |  | ent of Financial Affairs for li               | ndividuals Filing for Bankruptcy (Official Form 107)? I out bankruptcy forms?  |

#### Case 18-25457 Doc 1 Filed 09/10/18 Entered 09/10/18 17:22:19 Desc Main DISCLAIMER ODEbtons have greated and signee:

- Divorce or family support debts to a spouse, ex-spouse, child, guardian ad litem or similar person or entity in connection with a separation agreement, divorce decree or court order are not dischargable. Priority support debts must be paid in full in your Chapter 13 or it cannot be confirmed. DEBTS YOU AGREED TO ASSUME IN MARITAL SETTLEMENT AGREEMENTS are NON-DISCHARGEABLE if your ex-spouse files an adversary complaint, and the Judge rules that (a) you do not have the ability to pay the debt OR (b) discharging such debt would result in a benefit to you that outweighs the detriment to ex-spouse or your child. You agree to get advice in writing from your divorce attorney and send to us with copy of agreement. You must list any ex-spouse or spouse as a creditor. No guarantee any divorce debt is dischargeable. Property you are still on title to, or have a right to in a divorce, may be taken by a Bankruptcy trustee in a Chapter 7 and sold, or may be disposable income in a 13.
- Student loans and educational benefits are not discharged in Chapter 7 or 13 if government insured loan or owed to non-profit school unless you pay us to file a complaint within the bankruptcy to prove repayment would be an "undue hardship", and win. Interest on student loans continue to run while you are in a Chapter 13.
- Cosigners, joint applicants, debts of persons other than debtor, debts incurred during marriage in community property states, or for fimily support are 3. not discharged and joint, community or co-signers are not protected from collection unless you pay 100% of the debt. Creditors can collect from co-signors and put your bankruptcy on their credit report, and report them negatively to credit bureaus. You may prevent this by making the regular payments to the creditor. Creditors can liquidate collateral of your co-signer and refuse to continue payment in installments. Property you are joint on with other persons can be LIQUIDATED to pay your creditors.
- TAX DEBTS. Most taxes are not discharged in bankruptcy. However, income tax debt (1040 type tax) can be discharged if the following four rules are met: (1). The tax return was DUE at least 3 YEARS (plus extensions) before the filing of your bankruptcy case. (2). You FiLED your income tax return at least 2 YEARS before your bankruptcy was filed. (You did not file a return if the tax authority or IRS had to file one for you, or if you didn't send the return to the District Director) (3). You did not wilfully intend to evade the tax. (4). The tax must have been ASSESSED over 240 DAYS before the bankruptcy filling. We recommend you meet with the IRS or state department of revenue to make sure all the conditions have been met, before you hire us or file a bankruptcy. Fraudulent taxes and taxes on unfiled returns can be discharged in a Chapter 13 case. Time in an offers in compromise, & time in bankruptcy plus 6 months, will extend the above time periods, Employers' share of FICA & FUTA is dischargeable, but not trust fund taxes like the employee's funds or sales tax.
- 5. Fines, traffic tickets, parking tickets, penalties to governmental unit are not discharged in Chapter 7, may not be discharged in 13 without full payment.
- 6. Non filing spouse: If you file individually, your spouse is not our client. Only your debts are discharged. If you want to protect a non-filing spouse, pay their bills or file a joint case with them. Family expenses (medical bills, rent and necessities may be collected from a non-filing spouse). Wisconsin, community property is liable for community debts. 7. DUI PERSONAL INJURIES, DEBTS YOU DON'T LIST are not discharged.
- 8. DEBTS where creditors successfully object to discharge may survive Creditors, the Trustee, or Court, can try to deny discharge based on many factors,
- a. Income sufficient to pay a percentage of your unsecured debt. b. Failure to keep books and records documenting your financial affairs. c. Luxury purchases or cash advances within 60 days of filing or without intent or ability to repay. d. Debts you made by false pretenses, breach of fiduciary duty, wilful and malicious injuries to others e. Benefit overpayments like aid or unemployment if a determination of fraud has been made before or during bankruptcy. f. Failure to appear at meetings, court dates, or co-operate with the Trustee.
- 9. INTEREST ON NON-DISCHARGEABLE DEBTS in a Chapter 13 continues to accrue, and CREDITORS WHO DO NOT FILE CLAIMS in your Chapter 13 plan within 90 days (180 days for governmental units) of the meeting of creditors, do not get paid. Your plan and their claim should provide for interest at contract rate, or you will have to pay the debt outside the Chapter 13 plan. Property taxes must be paid by you directly to avoid sale for delinquent taxes.
- 10. LIQUIDATION OF REAL AND PERSONAL PROPERTY. If you file a Chapter 7, any property that is not listed and claimed exempt on Schedule C pursuant to state or federal law is taken and sold by the trustee to pay creditors. You agree to assume the risk that your property will be taken and sold by the bankruptcy trustee (at or less than what it is worth) if we can't protect it under applicable state law. You get a discharge, but the trustee can take property not listed and exempted on schedules B and C and sell it for whatever price will provide some benefit to creditors.
- 11. CHANGE IN LAWS. Laws & court cases change constantly. We can file your case today if you pay us in full (some attorneys give credit, we don't) pay the filing fee and sign your petition in our main office. ANY DELAY either in hiring us, or after, IS YOUR REPSONSIBILITY. ADVERSE RULINGS Judges that sit in adjoining courtrooms can rule differently on the same facts. We can predict but can't guarantee a judge will or will not rule against you. You accept the risk of a judge ruling against you, as in any lawsuit.
- 12. PAYMENTS TO CREDITORS YOU PREFERRED to pay more than \$600 in front of others, within 1 yr if a relative or insider, or within 90 days if another creditor, so don't pay off debts to keep credit cards or protect others. TRANSFERS OF PROPERTY within 4 years that made you unable to pay your debts at the time can be reversed by a Trustee and the transferee will have to give back the property you transferred.
- 13. SURRENDER OF PROPERTY Bankruptcy gets rid of debts, but real estate, condos and time shares remain in your name until a foreclosure sale or the lender accepts a deed in lieu of foreclosure. Turn condo keys over to condo association or remain liable for assessments after filing, and make sure you keep buildings & land insured and maintained and secured until it is taken back by lender or out of your name. If you let a house go vacant and pipes explode or someone gets killed in there you may be liable.
- 14. RIGHT TO RECEIVE inheritances, tax refunds, injury claims, compensation of any kind, insurance or realty commissions, are property of the bankruptcy estate and you will surrender these to the trustee unless they are claimed exempt on Schedule C, and no objection to your claim of exemption is upheld. Do not deduct extra money from taxes so you are entitled to a refund, change your W-9 if necessary.
- 15. JOINT ACCOUNT HOLDERS holders entire amount in the account could be taken by the trustee under Chapter 7.
- 16. MARRIED COUPLES GOING THROUGH DIVORCE: We have been advised to seek independent counsel for our bankruptcy. We understand that Peter Francis Geraci does not represent us with regard to any divorce matters and does not make any representations regarding what will happen in divorce court. We have decided to file a bankruptcy together dispite the fact that we are getting a divorce and our interests could be adverse. We have agreed to cooperate with each
- 17. AUTO LEASES & INSTALLMENT AGREEMENTS to purchase things, leases and almost all contracts will be void after bankruptcy. They are "executory contracts", and if they are of no benefit to the bankruptcy estate and not assumed within 60 days of filling, they are void. Debtors have been warned of this, and unless there is a novation under state law, or agreement not to use bankrptcy to void the contract, the debtors rights under the contract are extinguished. Debtor agrees to be responsible for obtaining such agreements or losing rights under such contracts. Debtor agrees that his or her attorney will not file motions to assume

18. Setoffs if you have money in a credit union or creditor account, or other loans that cross-collateralized, any money or property may be taken for both loans. The Undersigned have read the above & assume the risk that a debt is not discharged in bankruptcy, that our non-exempt property will be taken and sold by the bankruptcy trustee if it can't be protected, that the trustee might object if I/we have excess income, or change in State, Federal or Bankruptcy laws before the case

is filed in Court AND WE HAVE TO READ, CHECK & MAKE SURE OUR PETITION'S ACCURATE IN Dated: 9 / 5 /2018 KMMM ALMA X Date & Sign

Page 1 of 1 Asset Disclosure

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# UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION

In re

Rhonda Herlett Johnson / Debtor

Bankruptcy Docket #:

Judge:

#### **VERIFICATION OF CREDITOR MATRIX**

The above named Debtor(s) hereby verify that the attached list of creditors is true and correct to the best of our knowledge.

DECLARE UNDER PENALTY OF PERJURY THAT THE FOREGOING IS TRUE AND CORRECT

Dated: <u>4 / 5</u>/2018

Rhonda Herlett Johnson

X Date & Sign

<sup>\*</sup> Joint debtors must provide information for both spouses. Penalty for making a false statement or concealing property: Fine up to \$500,000 or up to 5 years imprisonment or both. 18 U.S.C. 152 and 3571.

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Part 4:

Sign Below

By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct.

Rhonda Herlett Johnson

Date: 9 / 5 /2018

If you checked line 17a, do NOT fill out or file Form 122C-2.

If you checked 17b, fill out Form 122C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above.

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| Debtor 1   | Rhonda                 | Herlett                        | Jonnson                             | Case Number (if known)                              |
|--|------------------------|--------------------------------|-------------------------------------|---|
|  | First Name             | Middle Name                    | Last Name                           |   |
| Part 4:  | Sign Below             |                                |                                     |   |
| America es lo la la maria  | By signing here, I dec | lare under penalty of perju    | ry that the information on this sta | atement and in any attachments is true and correct. |
| CANDON ON CAMPACTURE CONTRACTOR OF THE CAMPAC | Rhone                  | M JOHNO<br>nda Herlett Johnson | <b>O</b> ()_                        |   |
| WORKSTON OF THE PROPERTY.  | ' ℃ Rho                | nda Herlett Johnsor            | 1                                   |   |
| en de la companya de   | Date: Dated: 9         | <u>/</u> \$/2018               |                                     |   |

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Form B 201A, Notice to Consumer Debtor(s)

In re Rhonda Herlett Johnson / Debtor

Page 1

found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

## <u>Chapter 13</u>: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$75 administrative fee: Total fee \$310)

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

### Chapter 11: Reorganization (\$1,167 filling fee, \$550 administrative fee: Total fee \$1,717)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

### Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$75 administrative fee: Total fee \$275)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

### 3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

WARNING: Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The

Dated: 1 5 /2018

Rhonda Nerlett Johnson

X Date & Sign

Dated: \_\_\_/2018

Attorney: Cecil Denard Scruggs

Form B 201A, Notice to Consumer Debtor(s)

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